



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2013 MAR 25 AM 9:09

1. The name of the limited liability company is:

KELSEY, LLC

2. The complete street and mailing addresses of the initial designated office:

645 N. MAIN, PARIS, ID 83261

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

LARRY B. KELSEY

(Name)

645 N. MAIN, PARIS, ID 83261

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

LAURIE A. KELSEY

645 N. MAIN, PARIS, ID 83261

5. Mailing address for future correspondence (annual report notices):

645 N. MAIN, PARIS, ID 83261

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: LAURIE A. KELSEY

Signature _____

Typed Name: _____

Secretary of State use only

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03/25/2013 05:00
CK: 60752 CT: 1188 BH: 1366168
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