

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY



	(Instructions on bac	
1. The name of	of the limited liability co	SECRETARY OF STATE STATE OF IDAHO
	•	GR Enterprises, LLC
The comple		ddresses of the initial designated office:
	er Grove Dr., Eagle ID 8361	•
(Street Address		
(Mailing Addres	ss, if different than street address)	
	•	france of the remintered amount.
. The name a	and complete street add	Iress of the registered agent:
Steve A. Pe	el	619 W. Water Grove Dr., Eagle ID 83616
(Name)		(Street Address)
. The name a company:	and address of at least	one member or manager of the limited liability
	<u>Name</u>	Address
Steve A. Pe	91	619 W. Water Grove Dr., Eagle ID 83616
-		
. Mailing add	ress for future correspo	ondence (annual report notices):
_	er Grove Dr., Eagle ID 8361	,
Future effec	ctive date of filing (optio	nal):
	, , , , , , , , , , , , , , , , , , ,	
anature of a	manager, member o	r authorized
erson.	manager, member of	authorized
<i>[</i> -	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Secretary of State use only
gnature	WHA!	
yped Name:	Steve A. Peel	
_	 _	TABLE APPRETANT OF STATE
ignature		IDAHO SECRETARY OF STATE 07/25/2012 05:00
		CK: 1722 CT: 245087 BH: 133333 1 0 100.00 = 100.00 OKGON LLC #