



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 NOV 19 PM 4: 25

 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

McHenry, LLC

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

1479 W McHenry St. Kuna, ID 83634

(Street Address)

P.O. Box 942 Kuna, ID 83634

(Mailing Address, if different than street address)

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

Joseph L Kane

(Name)

1479 W McHenry St. Kuna, ID 83634

(Street Address)

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

Name
Address

Christina M Kane

1479 W McHenry St. Kuna, ID 83634

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

P.O. Box 942 Kuna, ID 83634

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Joseph L Kane

Signature

Typed Name: Christina M Kane

Secretary of State use only

IDAHO SECRETARY OF STATE

11/19/2014 05:00

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