



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 AUG 27 AM 8:27

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

S.I.R., LLC

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

850 IRONWOOD DR., STE 301, COEUR D' ALENE, ID 83814

(Street Address)

(Mailing Address, if different than street address)

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

MARC A. LYONS

(Name)

700 NORTHWEST BLVD., COEUR D' ALENE, ID 83816

(Street Address)

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

Name

Address

DAVID KING

850 IRONWOOD DR., STE 301, COEUR D' ALENE, ID 83814

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

850 IRONWOOD DR., STE 301, COEUR D' ALENE, ID 83814

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: MARC A. LYONS

Signature _____

Typed Name: _____

Secretary of State use only

g:\corpforms\LLC form\llcform_072008

IDAHO SECRETARY OF STATE
08/27/2008 05:00
CK: 10951 CT: 43788 BH: 1133289
1 @ 100.00 = 100.00 ORGAN LLC # 2

W77172