

Signature:

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Filing fee: \$100 typed, \$120 not typed
Complete and submit the application in duplicate.

FILED EFFECTIVE

2015 OCT 26 AM 9: 27

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability company is:

(Remember to include the word	ls "Limited Liability Company," "Lim	ited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and mail 1867 OFFSET RD	ing addresses of the pri	ncipal office is:
(Street Address) NEZPERCE, ID 83543		
(Mailing Address, if different)		
The name and complete stree	et address of the registe	red agent:
PHILIP W ARNZEN	1867 OFFSET RD, NEZPERCE, ID 83543	
(Name)	(Address)	
The name and address of at I	east one governor of the	e limited liability company
PHILIP W ARNZEN	1867 OFFSET RD, NEZPERCE, ID 83543	
(Name)	(Address)	
AMANDA J ARNZEN	1867 OFFSET RD, NEZPERCE, ID 83543	
(Name)	(Address)	
(Name)	(Address)	
7 		
(Name)	(Address)	
Mailing address for future cor	respondence (annual re	port notices):
1867 OFFSET RD, NEZPER		
(Address)		
ature of organizer(s).		
ed Name: PHILIP W ARNZEN		Secretary of State use only IDANO SECRETARY OF STATE
su Name.		10/26/2015 05:00
ature:		CK:7521 CT:316085 BH:1497839
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ed Name: AMANDA J ARNZE	N	
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