

Printed Name: Reece M. Hrizuk

Printed Name:

Rev. 11/2015

Signature:

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2016 AUG -8 AM 9: 56



The complete street and mai 224 S.W. 3rd Street, Fruitlan	ling addresses of the principal office is:
Street Address)	
P.O. Box 702, Fruitland, ID 8	33619
Mailing Address, if different)	
The name of the registered a	gent and street address of the registered agent:
Reece M. Hrizuk	224 S.W. 3rd Street, Fruitland, ID 83619
Name)	(Address cannot be a post office box or postal mail box)
Reece M. Hrizuk (Name)	224 S.W. 3rd Street, Fruitland, ID 83619  (Address)
(Name)	(Address)
(Name)	(Address)
(Name)	(Address)
•	rrespondence (annual report notices):
P.O. Box 702, Fruitland, ID	03018
1	

1@ 100.00 = 100.00 ORGAN LLC #2 W17D219

CK:2142 CT:284256 BH:1540950