

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 SEP -5 AM 8:51

1. The name of the limited liability company	SECRETARY OF STATE
McCammon Brothe	STATE OF IDAHO
2. The complete street and mailing address	es of the initial designated office:
Ille Gold Dust Rd.	
(Street Address) (Mailing Address, if different than street address)	<u> </u>
3. The name and complete street address of the registered agent:	
Daniel W McCammon (Str	Ille Gold Dust Rd. Det Address Cossode ID 83611
4. The name and address of at least one member or manager of the limited liability company:	
Name	Address
Daniel W McCammon	Ille Gold Dust Kd.
	Coecode ID 83611
	_
5. Mailing address for future correspondence (annual report notices):	
Ille Gold Dust Kd. Cascade ID 83611	
6. Future effective date of filing (optional): _	
Signature of a manager, member or auth	orized
person.	Secretary of State use only
Signature Hamel W. Mclem	
Typed Name: Daniel W McCam	TWON
Signature	IDAHO SECRETARY OF STATE
Typed Name:	CV. 182 CT. 287082 THE 1788644

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