

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAY 30 AN 9: 46

3920 W. 5th Avenue, Unit A-3, Post Falls, Idaho, 83854 (Street Address) (Mailing Address, if different than street address)	140
TWO KNIGHTS HOME BREW, LLC 2. The complete street and mailing addresses of the initial designated office: 3920 W. 5th Avenue, Unit A-3, Post Falls, Idaho, 83854 (Street Address) (Mailing Address, if different than street address)	
3920 W. 5th Avenue, Unit A-3, Post Falls, Idaho, 83854 (Street Address) (Mailing Address, if different than street address)	
(Mailing Address, if different than street address)	
The name and complete street address of the registered agent:	
LEVI KNIGHT 3920 W. 5th Avenue, Unit A-3, Post Falls, Idaho,	83854
(Name) (Street Address)	
 The name and address of at least one member or manager of the limited liabilit company: 	ty
Name Address LEVI KNIGHT 14175 Perimeter Rd, Athol, ID 83801	
M'LISS KNIGHT 14175 Perimeter Rd, Athol, ID 83801	
5. Mailing address for future correspondence (annual report notices): 14175 Perimeter Rd, Athol, ID 83801	
i. Future effective date of filing (optional):	
ignature of a manager, member or authorized erson.	
Secretary of State use only	
ignature	
/ped Name: LEVIXNIGHT	
ignature M WWW VIII ON I-A IDAHO SECRETARY	OF STATE

05/30/2013 05:00 CK: 29404 CT: 18611 BH: 1375864 1 0 100.00 = 100.00 ORGAN LLC # 2 1 0 20.00 = 20.00 EXPEDITE C # 3

Typed Name: M'LISS KNIGHT