

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

11 DEC 27 AM 9: 20

(Instructions on back of application)

	•	• •	DECETATIVE OF STATE
1.	The name of the limited liability com	pany is:	SECRETARY OF STATE STATE OF IDAHO
	lro	nTree Forge, L	
2.	2. The complete street and mailing addresses of the initial designated office: 521 West Palouse River Dr. #6, Moscow, ID 83843 (Street Address) P.O. Box 9984, Moscow, ID 83843 (Mailing Address, if different than street address)		
3.	3. The name and complete street address of the registered agent:		
	Daniel R. Vertrees	1212 Tamara	ck Dr., Moscow, ID 83843
	(Name)	(Street Address	
4.	he name and address of at least one member or manager of the limited liability ompany:		
	Name	Address	
	Daniel R. Vertrees 1212 Tamarack Dr., Moscow, ID 83843		ck Dr., Moscow, ID 83843
)		
5.	Mailing address for future correspondence (annual report notices):		
	P.O. Box 9984, Moscow, ID 83843		
6.	. Future effective date of filing (optional):		
_	nature of a manager, member or	authorized	
per	son.	1	Secretary of State use only
Sign	nature Wind		
_	ed Name: Daniel R. Vertrees		
- 1			IDANO SECRETARY OF STATE
Sign	nature		12/27/2011 05:00 cv. A31827 CT: 172899 8H: 1383310
Typed Name:			1 0 100.00 = 100.00 ORGAN LLC # 2

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