

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE FILED EFFECTIVE FILED EFFECTIVE FILED EFFECTIVE

	(Instructions on back	of application)	
1. The name	. The name of the limited liability company is:		STATE OF IDAHO
2. The comp	lete street and mailing ad	dresses of the initial desig	nated/principal office:
Street Addre	- POWDERHOR	N ST. BOISE	
(Mailing Add	ress, if different than street address)		
3. The name	and complete street add	ress of the registered age	nt:
(Name)	U L. SAXTON	(Street Address)	en St. 13015E, IDAHO 837 13
4. The name company:	and address of at least of	ne member or manager o	f the limited liability
	<u>Name</u>		ress
Kevin	L. Saxton	11192 POWDERH	DRU St. BOISE, ID 8371
			orn St Boise83713
			
5. Mailing ac	Idress for future correspon	ndence (annual report noti	ces):
1(192	rowderhow SI.	BOISE, IOA HO	83/13
6. Future eff	ective date of filing (option	nal):	
Signature of person.	a manager, member or	authorized	
	1114	- 8	Secretary of State use only
Signature		7	
Typed Name:	VENTH C SAVIA		
Signature	umin L ST	ton	IDAHO SECRETARY OF STATE 01/24/2011 05:00

01/24/2011 05:06 CK: 3113 CT: 254695 BH: 1256727 1 9 189.80 = 189.88 ORGAN LLC # 2

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Typed Name: Tamaira