



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 NOV 21 AM 8:16

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Elementals, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

20 East Main, Teton, ID 83451

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Kathryn Lee Fullmer

(Name)

20 East Main, Teton, ID 83451

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name**

**Address**

Kathryn Lee Fullmer

20 East Main, Teton, ID 83451

5. Mailing address for future correspondence (annual report notices):

Elementals, LLC; 20 East Main, Teton, ID 83451

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Kathryn Lee Fullmer

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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11/21/2008 05:00  
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