



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 FEB -2 AM 9:19

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

1. The name of the limited liability company is:

LONGFELLOW ENTERPRISES, LLC

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

3519-7th Street, Lewiston, ID 83501

(Street Address)

3519-7th Street, Lewiston, ID 83501

(Mailing Address, if different than street address)

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

GARY W. LONGFELLOW

(Name)

3519-7th St., Lewiston, ID 83501

(Street Address)

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

Name

Address

ROBERT LONGFELLOW

P.O. Box 1821, Sumner, WA 98390

GARY W. LONGFELLOW

3519-7th St., Lewiston, ID 83501

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

GARY W. LONGFELLOW, 3519-7th St., Lewiston, ID 83501

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 *Robert Longfellow*

Typed Name: ROBERT LONGFELLOW

Signature *Gary W Longfellow*

Typed Name: GARY W. LONGFELLOW

Secretary of State use only

IDAHO SECRETARY OF STATE
02/02/2009 05:00
CK: 9188 CT: 69462 BH: 1155818
1 @ 100.00 = 100.00 ORGAN LLC # 2

g:\corp\form\llc\format\cert_09g_llc.PMD
Revised 07/2008

Log 010810