



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 OCT 20 AM 9:27

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Teton Woodcrafters LLC

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

8750 N 1069 W Tetonia, ID 83452

(Street Address)

P.O. box 848 Driggs ID 83422

(Mailing Address, if different than street address)

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

Robert Reynolds

(Name)

8750 N 1069 W Tetonia, ID 83452

(Street Address)

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

Name

Address

James McCreight

9980 N. 500 W. Tetonia ID 83452

Robert Reynolds

8750 N 1069 W Tetonia, ID 83452

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

P.O. box 848 Driggs ID 83422

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Robert Reynolds

Typed Name: Robert Reynolds

Signature

James McCreight

Typed Name: James McCreight

Secretary of State use only

IDAHO SECRETARY OF STATE

10/21/2014 05:00

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