



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited lial	bility company is:
2. The complete street and ma 611 Angela Dr., Hailey Idaho 8	ailing addresses of the initial designated office:
(Street Address)	
(Mailing Address, if different than street	t address)
	reet address of the registered agent:
Dirk Zondag, Jr.	611 Angela Dr., Hailey Idaho 83333
(Name)	(Street Address)
company:	at least one member or manager of the limited liability
<u>Name</u>	Address 611 Angela Dr., Hailey Idaho 83333
Dirk Zondag, Jr.	Tri Angela Dr., Halley Idalio 63333
Lindsay Zondag	611 Angela Dr., Hailey Idaho 83333
5. Mailing address for future of 611 Angela Dr., Hailey Idaho 83	correspondence (annual report notices):
6. Future effective date of filing	g (optional):
ignature of a manager, mer erson.	
166	Secretary of State use only
ignature	IDANO SECRETARY OF STATE
yped Name: Dirk Zondag, Jr.	03/04/2015 05:00 CK:1637 CT:251931 BH:1464480
ignature <i>Wullay Stud</i>	16 100.00 = 100.00 ORGAN LLC
yped Name: Lindsay Zondag	<u>U</u>

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