



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 OCT 15 AM 11:32

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

LEMCO Wholesale, LLC

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

1116 South Vista Ave, Suite 204, Boise ID 83705

(Street Address)

(Mailing Address, if different than street address)

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

Susan J. C. Alveshere

(Name)

**1116 South Vista Ave. Suite 204
Boise, ID 83705**

(Street Address)

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

Name

Address

Donald James Alveshere

**1116 South Vista Ave.,
Boise, ID 83705**

Susan J. C. Alveshere

"

"

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

LEMCO Wholesale, LLC., 1116 South Vista Ave. Suite 204, Boise ID 83705

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

Signature of a manager, member or authorized person.

Signature

Typed Name: **Susan J. C. Alveshere**

Signature

Typed Name: **Donald James Alveshere**

Secretary of State use only

IDAHO SECRETARY OF STATE
10/15/2012 05:00
CK: 1164272 CT: 172099 BH: 1343636
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