

Signature_

Typed Name: _

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 JUL 18 AM 8:59

SECRETARY OF STATE STATE OF IDAHO

The name of the limited liability cor	ELY FAMILY, LLC	STATE OF IDAHO	
		ferman measure total attachment of the con-	
The complete street address, and reprincipal office:	mailing address if di	merent, of the initial designated.	
17209 E. Cape	Horn Road, Bayview, Id	aho 83803	
The name of the commercial regist address of the non-commercial reg	ered agent; or the n istered agent:	ame and complete street	
	John M. Ely Sa	me as #2	
The name and address of at least (company:	one member or mar		
Name		Address	
John M. Ely	17209 E. Cape Horn Rd., Bayview, ID 83803		
Melinda A. Ely	17209 E. Cape Horn Rd., Bayview, ID 83		
	·		
Mailing address for future correspo			
17209 E. Cape	Horn Road, Bayview, I	daho 83803	
m data af filing famili	anai):		
Future effective date of filing (option	Jilaij.		
ature of an organizer(s). (An organiz	zer is a member,		
acting in behalf of a required, and existing	g, initial member	Sometany of State use only	
embers).	PWO	Secretary of State use only	
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ed Name: John M. Æly	formstoan 772008	IDAHO SECRETARY OF STA 97/18/2008 95 CX: 1885 CT: 83260 RH: 1	

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