251

FILED EFFECTIVE



## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

2015 JUN -3 AM 9: 59

| (C)(S)        | (matructions on back of ap                | STATE OF IDAHO                              |
|---------------|---|---|
| 1. The nam    | ne of the limited liability company       | / is:                                       |
| Harc          | 1 (beur Grass 1                           | Solleyball tournament Lie                   |
|               | nplete street and mailing address         | es of the initial designated office:        |
| 276           | 7 W Timberlake (                          | p. Coeurd'Alene ID 83815                    |
| (Street Ad    | dress) - Same -                           |   |
| (Mailing A    | ddress, if different than street address) |   |
| 3. The nan    | ne and complete street address o          | of the registered agent:                    |
| v I           | 27  | 767W. Timberlake 1P.                        |
| hese          | 21 Stanley C                              | oeur d'Alene ID 838/5                       |
| (स्रह्मातः)   | Sire                                      | el Address)                                 |
| 4 The nan     | ne and address of at least one me         | ember or manager of the limited liability   |
| compan        |   | ships. of manager of the inflitted hability |
|               | <u>Name</u>                               | <u>Address</u>                              |
| hels          | ey Storrley 27                            | oeurd'Alene ID 838/5                        |
|               |   | Neural Mana IT 82016                        |
|               |   | Value Michael C. 1.5 858/5                  |
|               |   |   |
|               |   |   |
|               |   |   |
| <u> </u>      |   |   |
|               |   |   |
|               | address for future correspondence         |   |
| 276           | 7 W. Timberlake                           | LP. Courd'Alene ID 83815                    |
|               |   | <b>'</b>                                    |
| 6. Future e   | effective date of filing (optional): _    |   |
|               |   | }   |
| •             | of a manager, member or auth              | orized                                      |
| person.       | 4/ = 1                                    | Secretary of State use only                 |
| Signature 4   | 4 Steel Finley                            | ,   |
| Typed Name    | Kelsel Stanlow                            |   |
| Typed Hain    | s. T. Colocy Orabitely                    | IDAHO SECRETARY OF STATE                    |
| Signature     |   | 06/03/2015 05:00                            |
| Typed Name    | a.  | CK: 2896232 CT: 172099 BH: 1478             |
| ryped ridine. |   | 10 100 00 - 100 00 00CN TTC                 |

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