

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

ructions on back of application)

2014 APR 1	5 AM	10: 2	25
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A B W	(Instructions on back	or application)	Company of the second of the second
1.	The name of the limited liability cor	mpany is:	Stories of State of S
	WFS L.L.C.		
2.	The complete street and mailing ad 995 E. Loch Marree Dr., Hayden, Idaho,		tial designated office:
	(Street Address)		
	(Malling Address, If different than street address)		
3.	The name and complete street add	ress of the registe	ered agent:
	Paul C Mitchell	995 E.Loch Marre	e Dr., Hayden, Idaho, 83835
	(Name)	(Street Address)	
	Company: Name Paul C. Mitchell	995 E. Loch Marre	Address ee Dr., Hayden, ID., 83835
	Jessica J. West	PO Box 362, Keto	hikan, AK., 99950-0340
	Zack M. West	PO Box 362, Keto	hikan, AK., 99950-0340
	Austin Lee Mitchell	995 E. Loch Marre	ee, Hayden Id., 83835
5.	Mailing address for future corresponded by Section 1995 E. Loch Marree DR., Hayden ID., 83		eport notices):
6.	Future effective date of filing (option	nai):	
Sigr	nature of a manager, member or	authorized	
F 5	1/11/11/		Secretary of State use only
Sign	nature/TUR		
Тур	ed Name: Paul C. Mitchell		
O!			IDAHO SECRETARY OF STATE
-	nature		491CN 419C/31/49
тур	ed Name:		CX: 17185 CT: 295711 BH: 14283 1 8 166.90 = 188.88 ORGAN LLC # 1 8 28.08 = 20.90 EXPEDITE C

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