



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

10 AUG 31 PM 1:06

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Rejavanate LLC

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

1009 Hwy 2 Suite A. Sandpoint Idaho 83856

(Street Address)

(Mailing Address, if different than street address)

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

D'on Kyler

(Name)

389 Dunromin Rd Priest River Id.

83856

(Street Address)

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

Name

D'on Kyler

Address

389 Dunromin Rd.

Priest River Idaho 83856

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

389 Dunromin Rd Priest River Idaho 83856

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

Signature of a manager, member or authorized person.

Signature

D's

Typed Name: D'on Kyler

Secretary of State use only

Signature

Typed Name: _____

IDaho SECRETARY OF STATE
08/31/2010 05:00
CK: 9828 CT: 250863 BH: 1237088
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