



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 JUL 13 AM 9:44

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Rounds Spirit, LLC

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

5375 E. Woodlands Drive, Post Falls, ID 83854

(Street Address)

(Mailing Address, if different than street address)

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

Timothy M. Rounds

(Name)

5375 E. Woodlands Drive, Post Falls, ID 83854

(Street Address)

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

Name

Address

Timothy M. Rounds

5375 E. Woodlands Drive, Post Falls, ID 83854

Robert M. Rounds

5375 E. Woodlands Drive, Post Falls, ID 83854

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

5375 E. Woodlands Drive, Post Falls, ID 83854

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

Signature of a manager, member or authorized person.

Signature *Timothy M. Rounds*
Typed Name: Timothy M. Rounds, Member

Signature *Robert M. Rounds*
Typed Name: Robert M. Rounds, Member

Secretary of State use only

IDAHO SECRETARY OF STATE

07/13/2015 05:00

CK:5273 CT:176556 BH:1483484

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

W/53663