

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

		(Instructions on back	of application)	I O DEC E 1
1.	The name of	the limited liability com	.,	SECRET BRY OF STATE STATE OF IDAHO
••	Route 95 Machine & Hydraulic, LLC			
2.	-	e street and mailing add	Iresses of the initia	l designated/principal office:
	(Street Address) 226 Carr Cree	ek Rd Sandpoint, ID 83864 If different than street address)		
3.	The name and complete street address of the registered agent:			
	George W. Wright			k Rd., Sandpoint Id 83864
	(Name)		(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:			
		<u>Name</u>		Address
	George W. W	right	226 Carr Creek Rd S	Sandpoint, ID 83864
5.	Mailing address for future correspondence (annual report notices):			
	226 Carr Cree	ek Rd Sandpoint, ID 83864		
6.	Future effect	ive date of filing (option	al):	
_	nature of a son.	manager, member or	authorized	
•	nature	so we are		Secretary of State use only
		eorge W. Wright		e e e e e e e e e e e e e e e e e e e
Sig	nature			IDAHO SECRETARY OF STATE 12/28/2010 05:0
Тур	ed Name:			CK: 501 CT: 253626 BH: 12526 1 0 100.00 = 100.00 ORGAN LLC

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