CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 SEP -4 AM 8: 39

	•	n back of application)	20 mars for many .	
1. The	e name of the limited liabili	ity company is:	SECRETARY OF STATE	
	BONNALIE CONSTRUCTION, LLC		SIAIR OF DAYO	
	e complete street and mailii 421 GRELLE AVE	ing addresses of the initia	I designated office:	
LE	treet Address) EWISTON, ID 83501			
	(Mailing Address, if different than street address) The name and complete street address of the registered agent:			
LI	ISA WELCH	2215 CEDAR AVE.	LEWISTON, ID 83501	
(N	lame)	(Street Address)		
	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address	
<i>J/</i>	AMES L BONNALIË	1421 GRELLE AVE.	LEWISTON, ID 83501	
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	ailing address for future corr	respondence (annual repo	ort notices):	
	ailing address for future corr /A #2	respondence (annual repo	ort notices):	
<u>S/</u>	/A #2 		ort notices):	
<u>s/</u>			ort notices):	
<u>s/</u> 6. Fut	/A #2 ture effective date of filing (optional):	ort notices):	
S/ 6. Fut Signati	/A #2 ture effective date of filing (ture of a manager, memb	optional):	ort notices):	
S/ 6. Fut Signati person	ture effective date of filing (fure of a manager, memb	optional):	Secretary of State use only IDAHO SECRETARY OF STATE	
S/ 6. Fut Signati Serson: Signatu	ture effective date of filing (ture of a manager, memb	optional):oer-or authorized	Secretary of State use only IDAHO SECRETARY OF STATE 09/04/2014 05:00	
S/ 6. Fut Signati Serson: Signatu	ture effective date of filing (fure of a manager, memb	optional): per-or authorized nalie	Secretary of State use only IDAHO SECRETARY OF STATE	
S/ 6. Fut Signati person Signatu	ture effective date of filing (fure of a manager, member fure Mullipering (Name: Joanne Bon	optional): per-or authorized nalie	Secretary of State use only IDAHO SECRETARY OF STATE 09/04/2014 05:00 CK:5066 CT:241124 BH:14400	

cert_org_llc Rev. 07/2010