



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 FEB 27 AM 10:20

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

MacARTHUR MANAGEMENT, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC.)

2. The complete street and mailing addresses of the principal office is:

1009 BURRELL AVE, LEWISTON, ID 83501

(Street Address)

PO BOX 1652, LEWISTON, ID 83501

(Mailing Address, if different)

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

KAREN MacARTHUR

1009 BURRELL AVE, LEWISTON, ID 83501

(Name)

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:

KAREN MacARTHUR

PO BOX 1652, LEWISTON, ID 83501

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO BOX 1652, LEWISTON, ID 83501

(Address)

Signature of organizer(s).

Signature:

Karen MacArthur

Printed Name: **KAREN MacARTHUR**

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/27/2017 05:00

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