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# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAR -1 PM 2:22

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

NORTH STATE LLC

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

603 LUDS WAY, OROVILLE CA 95965

(Street Address)

(Mailing Address, if different than street address)

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

TROY THURGOOD

(Name)

125 E 1ST N, REXBURG ID 83440

(Street Address)

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

NameAddress

MICHAEL HILL

603 LUDS WAY, OROVILLE CA 95965

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

125 E 1ST N, REXBURG ID 83440

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: MICHAEL HILL

Signature

Typed Name:

Secretary of State use only

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03/01/2013 05:00  
CK: 1306341 CT: 172099 BH: 1362598  
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