



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

Title 30, Chapters 21 and 25, Idaho Code

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

2016 JAN -4 AM 9:57

 Complete and submit the application in duplicate.

 SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

ACL Enterprises, 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:

604 S. Riverside Harbor Dr., Post Falls, ID 83854

(Street Address)

(Mailing Address, if different)

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

Andrew Leese

604 S Riverside Harbor Dr., Post Falls, ID 83854

(Name)

(Address)

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

Andrew Leese

604 S Riverside Harbor Dr., Post Falls, ID 83854

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

604 S Riverside Harbor Dr., Post Falls, ID 83854

(Address)

Signature of organizer(s).

Printed Name: Andrew Leese

Signature:

Printed Name:

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

01/05/2016 05:00

CK:1205 CT:318498 BH:1506890

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