

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2014 FEB 26 PM 4: 17

1.	The name of the limited liability company is: SECRETARY OF STATE OF IDA Maui Winds LLC		SECRETARY OF STATE STATE OF IDAMO
			10/110
2.	The complete street and mailing addresses of the initial designated office: 5420 W. Wicher Road, Glenns Ferry, ID 83623 (Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Tom Fetzer (Name)	5420 W. Wicher Road, Glenns Ferry, ID 83623 (Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u> PowerWorks Projects LLC	<u>Address</u> 5420 W. Wicher Road, Glenns Ferry, ID 83623	
5.	Mailing address for future corres	•	ort notices):
	OTEO W. Wichel Road, Olellis I elly,	10 03023	
6.	Future effective date of filing (opt	tional):	
_	nature of a manager, member son.	or authorized	
	nature		Secretary of State use only
	ped Name: Tom Fetzer, Vice Preside	nt	
	nature		IDAHO SECRETARY OF STATE ・

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Typed Name: ____