



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 APR 13 AM 8:06

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Aviation Dreams, 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:

613 Bryden Ave., Ste. C, P.M.B. 133, Lewiston ID 83501

(Street Address)

(Mailing Address, if different)

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

Gary Peters

16915 Hatwai Rd 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:

Gary Peters

1915 Cherry Street, Clarkston, WA 99403

(Name)

(Address)

Jillyn Peters

1915 Cherry Street, Clarkston, WA 99403

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

613 Bryden Ave., Ste. C, P.M.B. 133, Lewiston, ID 83501

(Address)

Signature of organizer(s).

Signature:

Printed Name: Gary Peters

Signature:

Printed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

04/14/2017 05:00

CK:997 CT:293938 BH:1579095

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