



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

09 FEB 26 AM 8:49

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

THE SMOKESTACK, L.L.C.

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

866 S. SPOKANE STREET

(Street Address)

POST FALLS ID 83854

(Mailing Address, if different than street address)

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

MICHAEL GOGGIN

(Name)

866 S SPOKANE STREET POST FALLS ID 83854

(Street Address)

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

**Name**

**Address**

MICHAEL GOGGIN

866 S SPOKANE STREET POST FALLS ID 83854

STEVE GOBIN

866 S SPOKANE STREET POST FALLS ID 83854

JOHN SOUZA

866 S SPOKANE STREET POST FALLS ID 83854

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

866 S. SPOKANE STREET, POST FALLS ID 83854

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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02/26/2009 05:00  
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