



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

JUN 30 AM 8:39

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

AKINS ACRES, LLC

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

1039 ONAWAY ROAD, POTLATCH, ID 83855

(Street Address)

PO BOX 625, POTLATCH, ID 83855

(Mailing Address, if different than street address)

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

FLOYD AKINS

(Name)

1039 Onaway Rd Potlatch ID 83855

(Street Address)

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

NameAddress

FLOYD AKINS

PO BOX 625, POTLATCH, ID 83855

IRENE AKINS

PO BOX 625, POTLATCH, ID 838

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

PO BOX 625, POTLATCH, ID 83855

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: FLOYD AKINS, MANAGER

Signature

Typed Name: IRENE AKINS, MANAGER

Secretary of State use only

cert_org_llc Rev. 07/2010

IDAHO SECRETARY OF STATE
06/30/2011 05:00
CK: 23493 CT: 14262 SH: 1288689
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 104622