

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

10 SEP 22 AM 8: 26

(matructions on	back of application)	1 2 2 2
1. The name of the limited liability	company is:	SECHED BY OF STATE
	MW Rentals LLC	STATE OF IDAHO
2. The complete street and mailing 42418 S Highway 3, St. Maries, Idal (Street Address)	g addresses of the initial	designated/principal office:
(Mailing Address, if different than street address	ess)	
3. The name and complete street	address of the registered	agent:
Craig T. Wicks	42418 S Highway 3, S	t. Maries, Idaho 83861
(Name)	(Street Address)	
The name and address of at leacompany:	ist one member or mana	ger of the limited liability
<u>Name</u> Craig T. Wicks	Address	
	42418 S Highway 3, St. Maries, Idaho 83861	
Brian T. Miller	1121 Park Drive, St. M	laries, Idaho 83861
5. Mailing address for future corres		
 Mailing address for future corres 42418 S Highway 3, St. Maries, Idaho 		notices):
6. Future effective date of filing (op Signature of a manager, member person.	tional):	
A — 1		Secretary of State use only
Signature <u>Aug Tulio</u> Typed Name: Craig T Wicks		
· · · · · · · · · · · · · · · · · · ·		
ignature		IDAHO SECRETARY OF STATE
yped Name:		09/22/2010 05:00 ck: 5813 CT: 147881 BH: 1239964
		1 2 190.00 = 100.00 ORGAN LLC # 6

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