

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

LIMITED L	IABILITY COMPA	ANY 2014 SEP -8 AM 10: 0 SECRETARY OF STATE	
(Instructions on back of application)		SEORETAIN C	
1. The name of the limited	liability company is:	STATE OF STATE	
2. The complete street and 9190 No Drawbridge Ct (Street Address)	mailing addresses of the in	nitial designated office:	
(Mailing Address, if different than st	reet address)		
3. The name and complete	street address of the regis	tered agent:	
Robert A Robson	9190 No Drawbr	9190 No Drawbridge Ct HAYDEN, IDAHO 83835	
(Name)	(Street Address)	(Street Address)	
 The name and address of company: <u>Name</u> Torin L. Browning 		nanager of the limited liability Address to Rd RATHDRUM, IDAHO 83858	
5. Mailing address for future 9190 N DRAWBRIDGE CT	e correspondence (annual Haydan Ud 83835	report notices):	
s. Future effective date of fi	ling (optional):		
ignature of a manager, merson.	nember or authorized		
		Secretary of State use only	
ignature Kolfa In		IDAHO SECRETARY OF STATE 09/08/2014 05:00	
yped Name: ROBERT A ROBSON		CK:1439 CT:300891 BH:144035	
$\mathcal{L}(\mathcal{L})$		16 100.00 = 100.00 ORGAN LLC	
ignature (A) CONTRACTOR	NINC	w 141935°	
yped Name: TORIN L BROW	NING		

cert_org_lic Rev. 07/2010