

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

JUL -9 AM 8:43

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Grizzly Timber Falling L.L.C.

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

5542 West Stark ST Spirit Lake ID 83869

(Street Address)

(Mailing Address, if different than street address)

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

Jacob Thain

(Name)

5542 West Stark ST Spirit Lake ID 83869

(Street Address)

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

Name

Address

Jacob Thain

5542 West Stark ST Spirit Lake ID 83869

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

5542 West Stark ST Spirit Lake ID 83869

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

Signature of a manager, member or authorized person.

Signature Jacob Thain

Typed Name: Jacob Thain

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/09/2015 05:00

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