

Signature:

Signature:_

Rev. 11/2015

Printed Name: -

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE 2017 SEP 20 AN ID: 09

SECRETARY OF STATE STATE OF IDAHO

	nde the words "Limited Liability Company." "Limited Company," or the abbreviations L.L.C., LLC, or LC)
213 Milwaukee Rd	
Street Address)	
Maiting Address, if different)	
The name of the regis	stered agent and the street address of the registered agent:
Sam McClain	213 Milwaukee Rd St Maries, ID 83861
Name)	(Address cannot be a post office box or postal mail box.)
Name)	. (Address)
Name)	(Address)
Name)	(Aridress)
Mailing address for fu	rture correspondence (annual report notices): St Maries, ID 83861

IDAHO SECRETARY OF STATE

09/20/2017 05:00

CK:14708028 CT:172099 BH:1603729 16 100.00 = 100.00 ORGAN LLC #2

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