



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 DEC 28 PM 2:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

North Col Adventures LLC

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

5772 S. Orchid Way Boise ID 83716

(Street Address)

(Mailing Address, if different than street address)

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

Stephen L. Camkin

5772 S. Orchid Way Boise ID 83716

(Name)

(Street Address)

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

Name

Address

Stephen L. Camkin

5772 S. Orchid Way Boise, ID 83716

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

5772 S. Orchid Way, Boise ID 83716

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Stephen L. Camkin

Signature

Typed Name:

Secretary of State use only

g:\corpforms\LLC forms\cert_org_llc.PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
12/28/2009 05:00
CK: 363291 CT: 172099 BH: 1200000
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