

# CERTIFICATE OF ORGANIZATION LED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 SEP 11 AM 9:17

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Laib Honey LLC

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

52612 St. Hwy 78 Hammett, ID 83627

(Street Address)

(Mailing Address, if different than street address)

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

Christopher Laib

(Name)

52612 St. Hwy 78 Hammett, ID 83627

(Street Address)

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

**Name**

**Address**

Christopher Laib

52612 St. Hwy 78 Hammett, ID 83627

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

52612 St. Hwy 78 Hammett, ID 83627

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Christopher Laib

Typed Name: Christopher Laib

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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09/11/2013 05:00  
CK: 21241337556 CT: 287489 BH: 1389648  
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