

Signature: _

Rev. 01/2018

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00 typed, \$120 not typed Complete and submit the application in <u>duplicate</u>.

FILED EFFECTIVE

2018 APR -3 AM 9:00

SECRETARY OF STATE STATE OF IDAHO

| 1. | The name of the limited liability company is: | |
|----|---|--|
| | STOCKTON CONSTRUCTION 11 C | |

| (Remember to include the wor | rds "Limited Liability Company," "Limite | d Company, "or the abbreviations L.L.C., LLC, or LC) |
|--|--|--|
| The complete street and mailing | g addresses of the principal | office is: |
| 6776 LABROSSE HILL STR | EET, BONNERS FERRY | ID 83805 |
| (Street Address) | EDDY ID 9200E | |
| PO BOX 3084, BONNERS F | ERRT, ID 03005 | _ |
| | | |
| The name and complete street | address of the registered ag | ent: |
| HEIDI STOCKTON | 41 SUNRISE RO | OAD, STE A, BONNERS FERRY, ID 83805 |
| (Name) | (Address) | |
| The name and address of at less | not one governou of the limits | d Dalatta |
| The name and address of at lea KALEB STOCKTON | - | |
| (Name) | (Address) | BONNERS FERRY, ID 83805 |
| | (Address) | |
| (Name) | | |
| (14cm) (C) | (Address) | |
| | | |
| (Name) | (Address) | |
| | | |
| (Name) | (Address) | |
| B.J. 40 | | |
| Mailing address for future corres | | • |
| (Address) | ON, LLC, PO BOX 3084, I | BONNERS FERRY, ID 83805 |
| (Address) | | |
| ature of organizer(s). | | |
| ed Name: KALEB STOCKTO | N | Secretary of State use only |
| ed Name: 10 1223 0 10 0 17 0 1 | | IDAHO SECRETARY OF STATE |
| ature: AR OCK OV | <u></u> | 04/03/2018 05:00 |
| | <u> </u> | CK:1006 CT:355638 BH:1636096 10 100.00 = 100.00 ORGAN LLC # |
| ad Nama: | | TO TOO OF TOO ON ONGAR LILE # |