



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAR 18 AM 11:59

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Outdoor Life and Survival LLC

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

617 Cornwall way Fruitland ID 83619
(Street Address)

PO Box 941 Fruitland ID 83619
(Mailing Address, if different than street address)

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

Paul Morey
(Name)

617 Cornwall way Fruitland ID
(Street Address) 83619

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

Paul Morey
Name

PO Box 941 Fruitland ID 83619
Address

Kevin Thompson

910 Cornwall way Fruitland ID 83619

Bert Wingfield

PO Box 941 Fruitland ID 83619

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

PO Box 941 Fruitland ID 83619

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

Signature of a manager, member or authorized person.

Signature Paul Morey

Typed Name: Paul Lr Morey

Signature Kevin Thompson

Typed Name: Kevin S Thompson

Secretary of State use only

IDAHO SECRETARY OF STATE
03/18/2013 05:00
CK: 100.00 CT: 280718 BH: 1365067
1 @ 100.00 = 100.00 ORGAN LLC # 2

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