



# 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.

2017 FEB -1 AM 8:48

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

AH Post Frame Pros LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

3190 N stagecoach Dr. Post Falls, IDAHO 83854

(Street Address)

(Mailing Address, if different)

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

Aaron Haney 3190 N stagecoach Dr. Post Falls ID 83854

(Name)

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:

Elizabeth Haney 3190 N stagecoach Dr. Post Falls ID. 83854

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

3190 N stagecoach Dr. Post Falls IDAHO 83854

(Address)

Signature of organizer(s).

Signature: Aaron Haney

Printed Name: Aaron Haney

Signature: Elizabeth Haney

Printed Name: Elizabeth Haney

Secretary of State use only

IDAHO SECRETARY OF STATE

02/01/2017 05:00

CK: NO CK# CT: 334064 BH: 1566773

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 CORP SUR #3

1@ 20.00 = 20.00 EXPEDITE C #4

W 177436