

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2010 NOV 30 AM 11: 50

	(Instructions or	n back of application)	SECRETARY OF STATE
1.	The name of the limited liabil	ity company is:	STATE OF IDAHO
	Pita Pit North Dakota, LLC		
2.	The complete street and mail	ing addresses of the initial	designated/principal office:
	(Street Address) Coeur d'Alene, Idaho 83814 (Mailing Address, if different than street at	idress)	
3.	The name and complete street address of the registered agent:		
	Jack T. Riggs, M.D.	105 N. 4th Street, Suil	e 208, Coeur d'Alene, ID 83814
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Jack T. Riggs, M.D.	105 N. 4th Street, Sui	te 208, Coeur d'Alene, ID 83814
5.	Mailing address for future con		rt notices):
6.	Future effective date of filing	(optional):	
_	nature of a manager memberson.	per or authorized	
٠.			Secretary of State use only
_	ped Name Jack T. Riggs, M.D.		
_	nature		IDAHO SECRETARY OF STATE 11/30/2010 05:00 CK: NONE CT: 87354 BH: 1248873 1 B 188.88 = 198.88 ORGAN LLC 0
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