



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE
2015 MAR 30 PM 12:59

(Instructions on back of application)

 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

M V Coverings LLC

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

531 ASPEN DRIVE, HAILEY, ID 83333

(Street Address)

PO BOX 4375, HAILEY, ID 83333

(Mailing Address, if different than street address)

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

JASON A. MEDLEY

(Name)

531 ASPEN DRIVE, HAILEY, ID 83333

(Street Address)

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

Name

Address

JASON A MEDLEY

531 ASPEN DRIVE, HAILEY, ID 83333

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

PO BOX 4375, HAILEY, ID 83333

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

Signature of a manager, member or authorized person.

Signature *Jason A Medley*

Typed Name: JASON A MEDLEY

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/30/2015 05:00

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