

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

(Instructions on back of application)

2015 JUN 23 AM 8: 50

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1. The name of the limited liability co	ompany is:	SECRETARY OF STATE STATE OF IDAHO
401 S. Main, LLC		OIVIE OF IDAHO
2. The complete street and mailing ac 126 S. Main St., Suite A3, Hailey, Idaho (Street Address) PO Box 953, Hailey, Idaho 83333 (Mailing Address, if different than street address)		initial designated office:
. The name and complete street add	dress of the regi	stered agent:
Jeffrey L Engelhardt (Name)	126 S. Main St. (Street Address)	, Suite A3, Hailey, Idaho 83333
. The name and address of at least company:	one member or	manager of the limited liability
<u>Name</u>		<u>Address</u>
Jeffrey L Engelhardt	126 S. Main St.	, Suite A3, Hailey, Idaho 83333
PO Box 953, Hailey, Idaho 83333	ondence (annual	report notices):
i. Future effective date of filing (option	onal):	
ignature of a manager, member of erson.	or authorized	
ignature Jeffrey L Engelhardt	M	Secretary of State use only IDAHO SECRETARY OF STATE 06/23/2015 05:00 CK:7559 CT:154125 BH:148105
,,	:	16 100.00 = 100.00 ORGAN LLC
ignature		W1-217
yped Name:		W153175