

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

7012 APR 23 AM 10: 46

	•		s on back of applicati	3117	SECRETARY STATE STATE OF BRAHO	
1.	The name of	the limited lia	ability company is:		- 11. 11. 11.	
			JnJ Max, LL	C		
2.	The complete street and mailing addresses of the initial designated/principal office:					
	1317 Greyston	e Drive	McCall	ID	83638	
	(Street Address) PO Box 730		McCall	ID	83638	
	(Mailing Address, if	different than stre	et address)			
3. ⁻	The name and complete street address of the registered agent:					
	Jeanne W. Hen	1317 Greystone Drive, M			cCall, ID 83638	
	(Name)		(Street Addres	(Street Address)		
	company: Name			st one member or manager of the limited liability Address		
	Jay R. Henry	1317 Grevs	1317 Greystone Drive, McCall, ID 83638			
5. N	Mailing addres	ss for future (correspondence (ann	ual report n	otices):	
	PO Box 730		McCall IE		·	
6. F	- uture effectiv	e date of filin	ig (optional):			
		anager, me	mber or authorized			
erso		anager, me	mber or authorized		Secretary of State use only	
oerso Signa	on.	ten	mber or authorized		Secretary of State use only	
erso Signa Type	on. ature id Name: <u>Jay</u>	R. Henry	mber or authorized		Secretary of State use only	