

FILED EFFECTIVE



# AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 NOV 22 PM 12:38

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

MAIN LINE LLC

2. The name of the limited liability company is amended to read:

3. The date the certificate of organization was originally filed : 08/27/2008

4. The complete street and mailing addresses of the designated principal office is amended to:

P.O. Box 3530 Post Falls, Id 83877

5. The mailing address for future correspondence (annual reports) is amended to:

P.O. Box 3530 Post Falls, Id 83877

6. The name and address of the managers/members shall be amended as follows:

Name	Address	Add	Delete	Other
EARL COMBS	5301 E SHORELINE DR	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

7. Signature of an authorized person.

*Saundra Combs*  
Signature

SAUNDRA COMBS

Typed Name

AKA *Sonie Combs*  
Signature

*Sonie Combs*  
Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE  
11/22/2010 05:00  
CK: 2152 CT: 253005 BH: 1240171  
1 @ 30.00 = 30.00 ORGAN AMEN # 2

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