



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 AUG 30 AM 9 28
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Cascade Creek L.L.C.

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

218 4th. Street Clark Fork, Idaho 83811

(Street Address)

PO Box 189 Clark Fork, Idaho 83811

(Mailing Address, if different than street address)

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

Mark Parker

(Name)

218 4th Street Clark Fork, Id. 83811

(Street Address)

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

Name

Address

Mark Parker

PO Box 189 Clark Fork, Id. 83811

Patricia Parker

PO Box 189 Clark Fork, Id. 83811

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

PO Box 189 Clark Fork, Id. 83811

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Mark Parker

Signature

Typed Name: Patricia Parker

Secretary of State use only

IDAHO SECRETARY OF STATE
08/30/2010 05:00
CK: 5074 CT: 250799 BH: 1236817
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