

251

**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2013 MAR 26 AM 9:51

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Lost Cabin Studios, LLC

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

1698 SAGLE CREEK ROAD, SAGLE, ID 83860  
(Street Address)P.O. Box 271, SAGLE, ID 83860  
(Mailing Address, if different than street address)

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

Andrew T. Platte  
(Name)120 E. Lake Street, Suite 202, Sandpoint, ID 83864  
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Rob Strang</u>	<u>3181 E. Dufort Road, Sagle, ID 83860</u>
<u>Riedar Wahl</u>	<u>PO Box 271, Sagle ID 83860</u>

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

120 E. Lake Street, Suite 202, Sandpoint, ID 83864

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Rob StrangTyped Name: Rob StrangSignature Riedar WahlTyped Name: Riedar Wahl

Secretary of State use only

IDAHO SECRETARY OF STATE  
 03/26/2013 05:00  
 CK: 1335695 CT: 172099 BH: 1366452  
 1 @ 100.00 = 100.00 ORGAN LLC # 2  
 1 @ 20.00 = 20.00 EXPEDITE C # 3

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