FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAY 12 AM 8: 42

SECRE BRY OF STATE STATE OF IDAHO

1.	The name of the limited liability com	pany is:	STATE OF IDAHO
	Flathe	ad Log Recovery LLC	
2.	The complete street and mailing add 233 E Palouse River Drive, Moscow, ID		designated/principal office:
	(Street Address) PO Box 9748 Moscow, ID 83843 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Vincent P. Corrao	233 E Palouse River D	r Moscow, ID 83843
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Northwest Management, Inc.	PO Box 9748 Moscow	, ID 83843
	· · · · · · · · · · · · · · · · · · ·		<u>. </u>
5.	Mailing address for future correspond PO Box 9748 Moscow, ID 83843	dence (annual repor	t notices):
3.	Future effective date of filing (options	al):	
_	nature of a manager, member or son.	authorized	
C1	4.4		Secretary of State use only
lia	nature Thomas M. Recharde		

IDAHO SECRETARY OF STATE 05/12/2011 05:00 CK: 5884 CT: 214619 BH: 1273352 1 0 100.00 = 100.00 ORGAN LLC # 2

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Typed Name: Thomas M. Richards for NMI

Typed Name:

Signature _____