



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 APR 15 AM 9:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

BS RV, LLC

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

210 FAWN LANE, BONNERS FERRY, ID 83805

(Street Address)

210 FAWN LANE, BONNERS FERRY, ID 83805

(Mailing Address, if different than street address)

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

SANDRA MOSS

(Name)

210 FAWN LANE, BONNERS FERRY, ID 83805

(Street Address)

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

Name

Address

SANDRA MOSS

210 FAWN LANE, BONNERS FERRY, ID 83805

ROBERT MOSS

210 FAWN LANE, BONNERS FERRY, ID 83805

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

210 FAWN LANE, BONNERS FERRY, ID 83805

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

Signature of a manager, member or authorized person.

Signature Sandra Moss

Typed Name: SANDRA MOSS

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/15/2013 05:00
CK: 1269 CT: 201937 BH: 1369498
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