

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY

(Instructions on back of application)

AUG 11 AM 9:59  
SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

OUR FACTOR, LLC

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

357 Elk Haven Circle, Pollock, ID 83547

(Street Address)

P.O. Box 283, Pollock, ID 83547

(Mailing Address, if different than street address)

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

Allan Yearsley

(Name)

357 Elk Haven Circle, Pollock, ID 83547

(Street Address)

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

Name

Address

Melanie Silva

357 Elk Haven Circle, Pollock, ID 83547

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

P.O. Box 283, Pollock, ID 83547

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Allan Yearsley

Signature

Typed Name:

Melanie Silva

Secretary of State use only

5/10/08 Form LLC Form 1001 Rev. 07/2007

IDAHO SECRETARY OF STATE  
08/11/2008 05:00  
CK: 141381 CT: 172099 BH: 1131058  
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