

FILED EFFECTIV CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

-arc HOP	21	E_{ij}	9,	28
CENT				

250	(Instructions on	back of application)	-1. 106 27 AN 9:28
1. The name	of the limited liabili	ty company is:	SECRETARY OF STATE STATE OF IDAHO
		illow Pine Backcountry Store,	LLC STATE OF IDAHO
2. The compl	ete street and maili	ng addresses of the initia	al designated office:
	Pine Ave. Yellow Pine	Idaho 83677	
(Street Address P O Box 65	ss) 5 Yellow Pine Idaho 836	377	
	ess, if different than street add		
3. The name	and complete stree	t address of the register	ed agent:
Cindy C Fo	rtin	315 Yellow Pine Ave	, Yellow Pine Idaho 83677
(Name)		(Street Address)	
company:	Name		nager of the limited liability Address
			
Michael E F	ortin	P.O. Box 65, Yellov	v Pine Idaho 83677P
5 Mailing ad	dress for future com	respondence (annual rep	port notices):
	5 Yellow Pine Idaho	ashamana (muma, cat	•
P O Box 6:) Tellow Fille Idalio		
O Future offe	native data of filing ('ontional):	
b. Future en	sclive date of limity (optional):	
_		المحسان الم	
_	a manager, memb	er or authorized	
person.	2		Secretary of State use only
Signature \angle	inde C.	Interior	
Typed Name:	Cindy C Fortin	J. J. J	
туреч папіе.			
Signature			IDANO SECRETARY OF
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- 3 h			CK: 4308 UI: C(00// N

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