



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2009 JAN 22 AM 8:23

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Joseph Schiess LLC

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

190 Farrens Creek Lane, Grangeville, ID 83530

(Street Address)

(Mailing Address, if different than street address)

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

Joseph Schiess

190 Farrens Creek Lane, Grangeville, ID 83530

(Name)

(Street Address)

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

**Name**

**Address**

Joseph Schiess

190 Farrens Creek Lane, Grangeville, ID 83530

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

190 Farrens Creek Lane, Grangeville, ID 83530

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 Joseph Schiess  
Typed Name: Joseph Schiess

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

51ccrplfarmsllc form/seart\_09\_16.PMD  
Revised 07/2008

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01/22/2009 05:00  
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