

Typed Name: _____

CERTIFICATE OF ORGANIZATION

2. The co	me of the limited liability C. Yockey LL mplete street and mailing 0.2 West Sixtl	company is: C addresses of the initial d b Street, Mosc	
	O. Box 8567 M Address, if different than street address	•	
3. The na	me and complete street a	ddress of the registered a	igent:
Ch (Name)	ris Yockey	402 West Six	44 St., Moscow, ID 83843
4. The nar	me and address of at leas		
Ch	ris Yockey	402 West Si	Address xth St., Moscow, ID 83843
·			
	address for future corresp . Box 8567 M		
6. Future e	effective date of filing (opti	ional):	
Signature of acting in behal	organizer(s). (An organizer i f oka member or members).	is a member, or is	·
Signature	100	- DMC	Secretary of State use only
Typed Name	Char bochey	ALC formstear_org_fc.PMD d 07/2008	W79247
Signature		ALIC for	TRAID CEPPETADY OF STAT

IDAHO SECRETARY OF STATE
11/14/2008 05:00
CK: 1684 CT: 224117 BH: 1144442
1 0 100.88 = 188.80 ORGAN LLC 8 2