FILED EFFECTIVE



## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 MAR -2 AM 9-21

SECRETARY OF STATE

•	ompany is: STATE OF STA
	ompany is: STATE OF STATE OF IDAHO
The complete street and mailing or	ddresses of the initial designated/principal office:
•	US Hwy 30; Hansen ID 83334
(Street Address)	we my we, i tallown the woods
(Mailing Address, if different than street address)	
,	
The name and complete street add	pless of the registered agent.
Leejean E. Stanger	22652 B US Hwy 30; Hansen, ID 83334
(Name)	(Street Address)
company:  Name  Kip E. Stanger	Address 22652 R Lis Huw 30: Hansen ID 82224
KIP E. STANGER	22652 B US Hwy 30; Hansen, ID 83334
Mailing address for future correspo	ondence (annual report notices):
<del>-</del>	ondence (annual report notices): US Hwy 30; Hansen, ID 83334
<del>-</del>	· · · · · · · · · · · · · · · · · · ·
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