

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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08 JUL 21 PH 12:00
SECRETARY OF STATE OF IDAHO

· · · · · · · · · · · · · · · · · · ·	dresses of the initial designated/principal office:
1200 E. Main Ave., Challis (Street Address)	, Idano 83226
PO Box 810, Challis, Idaho (Mailing Address, if different than street address)	83226
The name and complete street addr	ess of the registered agent:
Larry Weiner (Name)	1200 E. Main Ave., Challis, Idaho 83226
(realize)	(Street Address)
he name and address of at least o	ne member or manager of the limited liability
company:	
<u>Name</u>	Address
Larry Weiner	PO Box 810, Challis, Idaho 83226
Vicky Weiner	PO Box 810, Challis, Idaho 83226
failing address for future correspon	
PO Box 810, Challis, Idaho	83226
uture effective date of filing (option	al)•
and chouse date of hang (opposi	EA1).
ature of organizer(s). (An organizer is a	member or is
in behalf of a member or members).	
	Secretary of State use only
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