

Typed Name:

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 10 JUN - 1 AM 8: 28

(Instructions on back of application)

(	,	SECRETARY OF STATE
The name of the limited liability company is:		SECRETARY OF STATE
44	Ith Street Investments LLC	_
The complete street and mailing	addresses of the initial	designated/principal office:
-	r St,Suite 200, Sandpoint, II	
(Street Address)	Box 905, Sandpoint, ID 838	64
(Mailing Address, if different than street address	· · · · · · · · · · · · · · · · · · ·	
The name and complete street a	ddress of the registered	I agent:
Casey Krivor	506 W. Alder St, S	Suite 200, Sandpoint, ID 83864
(Name)	(Street Address)	
company:		Address
Casey Krivor	P.O. Box 90	05, Sandpoint, ID 83864
graphic and the second of the second		
Mailing address for future corres	oondence (annual repo	rt notices):
P.O. I	Box 905, Sandpoint, ID 838	64
		The second second
Future effective date of filing (opt	ional):	
nature of organizer(s). (An organizer	is a member, or is	
ing in behalf of a member or members).	Q	Secretary of State use only
nature ///	ovo_lic.PMD	W93760K
ped Name: Casey Krivo		
	skLC forms/cert	IDANO SECRETARY OF STATE
gnature	4 07	CK: 14444 CT: 69881 RH: 12