

Printed Name:

Printed Name:

Signature:_

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

Vincent Holdings, L.L.C.	
	"Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and mailing	addresses of the principal office is:
655 W. Clayton Ave., Coeur d'Al	• •
Street Address)	
Mailing Address, if different)	
The name of the registered agen	t and street address of the registered agent:
Amy Vincent	655 W. Clayton Ave., Coeur d'Alene, ID 83815
Name)	(Address cannot be a post office box or postal mail box)
Name)	1416 W. Broadwater Court, Post Falls, ID 83854 (Address)
Name) Thomas & Lynn Vincent Family	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854
Name) Thomas & Lynn Vincent Family T	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address)
Name) Thomas & Lynn Vincent Family T Name) LLC Michael and Sarah Uemoto	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854
Name) Thomas & Lynn Vincent Family Towns Name) Michael and Sarah Uemoto Name)	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854 (Address)
Name) Thomas & Lynn Vincent Family T Name) LLC Michael and Sarah Uemoto Name)	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854
Name) Thomas & Lynn Vincent Family Towns Name) Michael and Sarah Uemoto Name) Name)	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854 (Address)
Name) Thomas & Lynn Vincent Family Towns Name) Michael and Sarah Uemoto Name) Name) Wailing address for future corres	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854 (Address) (Address) pondence (annual report notices):
Name) Thomas & Lynn Vincent Family Towns Name) Michael and Sarah Uemoto Name) Name) Wailing address for future corres	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854 (Address) (Address) pondence (annual report notices):
Michael and Sarah Uemoto Name) Name) Mailing address for future correspondence (Address)	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854 (Address) (Address) pondence (annual report notices):
Name) Thomas & Lynn Vincent Family Thomas & Lynn Vincent Family Thomas Name) Michael and Sarah Uemoto Name) Name) Mailing address for future corresponded to the correspondence of the correspondence	(Address) Trust 3753 N. Arrowleaf, Post Falls, ID 83854 (Address) 1445 W. Watercress, Post Falls, ID 83854 (Address) (Address) pondence (annual report notices):

IDAHO SECRETARY OF STATE

03/24/2016 05:00

CK:6162 CT:322245 BH:1520243 16 100.00 = 100.00 ORGAN LLC #2 16 20.00 = 20.00 EXPEDITE C #3

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