

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

09 MAY 18 AM 9:19

The name of the limited liability	y company is: SECRETARY OF STATE STATE OF IDAHO Basso, LLC	
•	ng addresses of the initial designated/principal o	ffice:
(Street Address)	E. 1st Ave., Post Falls, ID 83854	
(Mailing Address, if different than street add		
	address of the registered agent:	
Timothy V. Short	611 E. 1st Ave., Post Falls, ID 83854	
(Name)	(Street Address)	·
4. The name and address of at le company: Name Timothy V. Short	east one member or manager of the limited liabil Address 611 E. 1st Ave., Post Falls, ID 83854	ity
Barbara H. Short	611 E. 1st Ave., Post Falls, ID 83854	
	espondence (annual report notices): I E. 1st Ave., Post Falls, ID 83854	
6. Future effective date of filing (c	optional):	
Signature of organizer(s). (Anorganization of a member or members).	
	Secretary of State use on	ły
Signature // Timethy V	Short B	
Typed Name:Timothy. V s	Short	
Signature Parbara hor	A ON SHALL BE	
Typed Name: Barbara N	Short Store 95/18/20	TARY OF STATE