



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 MAR 25 AM 10:15

(Instructions on back of application)

1. The name of the limited liability company is:

Whitewolf LLC.

2. The complete street and mailing addresses of the initial designated office:

723 South 2600 West Weston Id 83286
(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Bart Ashby
(Name)

723 S. 2600 W. Weston Id 83286
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Bart Ashby

723 S. 2600 W Weston Id 83286

Peggy Ashby

723 S. 2600 W Weston Id 83286

5. Mailing address for future correspondence (annual report notices):

723 South 2600 West Weston Id 83286

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Bart Ashby

Typed Name: Bart Ashby

Signature Peggy Ashby

Typed Name: Peggy Ashby

Secretary of State use only

IDAH0 SECRETARY OF STATE

03/26/2013 05:00

CK: 307 CT: 281871 BH: 1366299

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