

**FILED EFFECTIVE**

251



# **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

(Instructions on back of application)

**NOV 20 PM 3:39****SECRETARY OF STATE  
STATE OF IDAHO**

1. The name of the limited liability company is:

Phoenix Woodworking LLC

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

212 S. Front St. Cascade, ID 83611

(Street Address)

P.O. Box 385 Cascade, ID 83611

(Mailing Address, if different than street address)

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

Brian Hegerhorst

(Name)

212 S. Front St. Cascade, ID 83611

(Street Address)

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

**Name****Address**

Brian Hegerhorst

P.O. Box 385 Cascade, ID 83611

Heather Hegerhorst

P.O. Box 385 Cascade, ID 83611

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

P.O. Box 385 Cascade, ID 83611

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Brian Hegerhorst

Signature

Typed Name: Heather Hegerhorst

Secretary of State use only

IDAHO SECRETARY OF STATE

**11/20/2014 05:00**CK:2373558 CT:172099 BH:1450184  
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