

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JAN 26 AM 8:53

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Mike N Mike, LLC

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

1000 Hopkins Rd Sandpoint, ID 83864
(Street Address)

Same

(Mailing Address, if different than street address)

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

Mike Duperault

(Name)

1000 Hopkins Rd Sandpoint ID 83864

(Street Address)

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

Name

Mike Duperault

Address

1000 Hopkins Rd. Sandpoint, ID 83864

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

1000 Hopkins Rd. Sandpoint, ID 83864

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Mike DuperaultTyped Name: MIKE DUPERAULT

Secretary of State use only

Signature _____

Typed Name: _____

LLC Form 100
Revised 07/2008

IDAHO SECRETARY OF STATE
01/26/2009 05:00
CK: 5186 CT: 233464 BN: 1153092
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