Signature:

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

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

2016 MAR 17 AM 9:43

Complete and sui	mit the application in <u>duplicate</u> .	STATE OF STATE	
The name of the limited lia	bility company is:	STATE OF ICALIATE	
Orofino Motorcycle Club I	LC		
(Remember to include the	words "Limited Liability Company," "Limited	Company," or the abbreviations L.L.C., LLC, or LC)	
The complete street and r	nailing addresses of the princ	ipal office is:	
319 Hospital Drive Orofine			
(Street Address)			
P.O. Box 524 Orofino, Ida (Mailing Address, if different)	ho 83544		
(Maning Pooress, it offerent)			
The name and complete s	treet address of the registere	d agent:	
James Engle	319 Hospital Driv	319 Hospital Drive Orofino, Idaho 83544	
(Name)	(Address)		
T			
	t least one governor of the limited liability company:		
James Engle	319 Hospital Drive Orofino, Idaho 83544		
, (20.100)	(Address)		
Josh Steiner	309 Timber Rim Drive Orofino,Idaho 83544		
Name)	(Address)		
Mark Fowler	24l Hiden Springs Lane Orofino, Idaho 83544		
Name)	(Address)		
Name)	(Address)		
	correspondence (annual repo	ort notices):	
P.O. Box 524 Orofino, Ida	ho 83544		
(Address)			
ture of organizer(s).			
	ſ	Secretary of State use only	
d Name: James A. Engle		10AHO SECRETARY OF STATE 03/17/2016 05:00	
ature:	1	CK:8085 CT:321918 BH:1519072	
4	107	16 100.00 = 100.00 ORGAN LLC 16 20.00 = 20.00 EXPEDITE C	
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