

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

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SECRETORY OF STATE STATE OF IDAHO
ed office:
LO 83846
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St. Mullan, Id SS) 83846 Ilmited liability
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ullan, Id. 83846
83846
ry of State use only

	(Instructions on back of app						plication)				SECRET BY OF STA STATE OF IDAHO		
1.	The name of the limited liability company is:									OTATE	UF IDAHO		
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2.	The	complete :		<del></del>		•	he init	ial desi	onated o	office:			
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	(Stre	at Addmost											
	(Ma	lling Address, if	different than	street addres	<b>/</b> *(	inilan,	<u> </u>	ι, 8	5041	P			
3. The name and complete street address of the registered agent:													
		Alan	Gild	a		129	Res	idenc	e St.	Mulla	n, Id		
	(Nai	me)				(Street Addre	es) MAIL USPO	ING A	DDR ESS)	Mulla	83846		
4.		name and pany:	address	of at leas	st one	e member	or ma	anager	of the lin	nited liabili	ty		
			Name					Ad	dress	24 - 17 <u></u> •			
		<u> Malinda</u>	Gilde	<u> </u>		P. D.	Box	498	Mul	lan, Id.	83846		
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5.	Mail	ing addres	s for futu	re corres	pond	ence (ann	ual re	port no	tices):	·			
		P. O. R	οX	498	·M	ullan,	I	daho	8	3846			
				ii i									
6.	Futu	re effective	date of	filing (op	tional	l):				<u>,</u>	· · · ·		
_	natu son.	re of a ma	anager,	member	or a	uthorized	j						
-		/	- 0	11	7 /				Secretary o	f State use only			
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Тур	ed N	lame: <u> </u>	1al:nd	<u> 6.</u>	109								
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Sigr	natur	e	······································	<del>*</del>		<del></del>			TRAL	io secretary i	NE STATE		
Тур	ed N	ame:		·		<del></del>			91/1	9/2012 CT: 251620	05:00		
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