



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2015 MAY 11 AM 10:21

1. The name of the limited liability company is:

Ford Travel Adventures, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

295 S 100 W St. Charles, ID 83272

(Street Address)

PO Box 155 St. Charles, ID 83272

(Mailing Address, if different than street address)

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

Adrienne Ford

295 S 100 W St. Charles, ID 83272

(Name)

(Street Address)

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

Name

Address

Adrienne Ford

PO Box 155 St. Charles, ID 83272

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

PO Box 155 St. Charles, ID 83272

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Adrienne Ford

Typed Name: Adrienne Ford

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/11/2015 05:00

CK:1131 CT:310101 BH:1475040

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