

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

FILED EFFECTIVE

2015 MAR 13 AM 11: 32

	(instructions on bac	ck of application)	SECRETARY OF STATE STATE OF IDAHO
1. The r	name of the limited liability co	ompany is:	STATE OF IDAHO
	SICING SIDING LLC		
_	complete street and mailing a		
		V Mountain Ho.	22 1D 83697
,	et Address) BOX 158 HAMMETT ID 83627		
(Maili	ng Address, if different than street address)		
3. The r	The name and complete street address of the registered agent:		
JULI	AN GOMEZ	302 W 5TH NORTH MTN HOME ID 83647	
(Nam	e)	(Street Address)	
JULI	Name NAN GOMEZ	Address 302 W 5TH NORTH MTN HOME, ID 83647	
JULI	AN GOMEZ	302 W 5TH NORTH MTN HOME, ID 83647	
LEO	NARDO GOMEZ	1855 W LAKE POINT CT NAMPA, ID 83651	
<del></del>			
5. Mailir	ng address for future correspo	ondence (annual report noti	ces):
PO F	BOX 158 HAMMETT ID 83627		
6. Futur	e effective date of filing (option	onal):	
Signatur	e of a manager, member o	or authorized	
person.	/7		
	Man 1	S S S S S S S S S S S S S S S S S S S	Secretary of State use only
Signature			IDAMO SECRETARY OF STATE
Typed Ma	me: JULIAN BOMEZ		03/13/2015 05:00
<i></i>	0 : 0		59868 CT:172099 BH:1460
Signature	: Souls Spring		u.uu = 100.00 UMGAN LL(
Typed Na	ame: LEONARDO GOMEZ		MULAULO
Typed Na Signature	ame: JULIAN BOMEZ		03/13/2015 05:00

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