



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 OCT 14 AM 11:49
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

A GOOD TABLE LLC

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

10 Bluegrouse Ridge Lane, Hailey, Id. 83333
(Street Address)

P.O. Box 5973, Ketchum, Id. 83340
(Mailing Address, if different than street address)

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

BRIAN M. MCCOY
(Name)

10 Bluegrouse Ridge La, Hailey, Id. 83333
(Street Address)

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

Name	Address
<u>BRIAN M. MCCOY</u>	<u>10 Bluegrouse Ridge La, Hailey, Id. 83333</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

P.O. Box 5973, Ketchum, Id. 83340

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

Signature of a manager, member or authorized person.

Signature Brian M. McCoy
Typed Name: BRIAN M. MCCOY

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/14/2011 05:00
CK: 888711 CT: 172899 BH: 1294254
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W107469