	CERTIFICATE OF LIMITED LIABIL (Instructions on bac	ITY COMPANY	FILED EFFECTIV 2009 JUL -8 AM 10: 26 SECRETARY OF STATE
1 Thor	me of the limited liability company is:		STATE OF IDAHO
t. met		DELO, LLC	
2. The c	omplete street and mailing a		nated/principal office:
	-	12 S Forest Glen Blvd	
(Stree	Address)	Post Falls, ID 83854	
(Maillr	g Address, if different then street address)		
3. The r	ame and complete street ad	dress of the registered age	nt:
(Nam	Charles J. DeLorenzo 412 S Forest Glen Blvd, Post Falls, ID (Name) (Street Address)		d, Post Falls, ID 83854
4. The n comp		one member or manager of the limited liability Address 412 S Forest Glen Blvd, Post Falls, ID 83854	
5. Mailin	g address for future correspo 412 S Fores	ondence (annual report not st Glen Blvd, Post Falls, ID 83854	•
6. Future	effective date of filing (optio	onal):	· · · · · · · · · · · · · · · · · · ·
+-			Secretary of State use only
	·	C former)	W 85248
Signature		1	