

Signature _

Typed Name. Joni Dewey

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

11 FEB 24 AM 8: 37

	(Instructions on back	of application)	SECEL BY OF STATE
1. The	e name of the limited liability cor	mpany is:	SECEL BY OF STATE STATE OF IDAHO
	De	ewey Properties LLC	
	e complete street and mailing ad 12 West Main Grangeville ID 83530	dresses of the initia	Il designated/principal office:
PC	reet Address) D Box 340 Grangeville ID 83530 ailing Address, if different than street address)		
3. The	The name and complete street address of the registered agent:		
Jo	ni Dewey	132 West Main Grangeville ID 83530	
(N	ame)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		<u>Address</u>
Bu	ıck Dewey	PO Box 340 Grange	ville ID 83530
Jo	ni Dewey	PO Box 340 Grange	ville ID 83530
	. ,		
_			
	iling address for future correspor D Box 340 Grangeville ID 83530	ndence (annual rep	ort notices):
6. Fut	ure effective date of filing (option	nal):	
Signatu person.	ure of a manager, member or	authorized	
L =. 2011			Secretary of State use only
	re Blaur		
	Name: Buck Dewey		