



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 SEP 22 AM 11: 53

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Forty Days LLC

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

1561 Ioder Pl

(Street Address)

Meridian ID 83642

(Mailing Address, if different than street address)

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

Gary Fazenbaker

(Name)

1561 Ioder Pl Meridian ID 83642

(Street Address)

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

Name

Address

Gary Fazenbaker

1561 Ioder Pl Meridian ID 83642

Debra Fazenbaker

1561 Ioder Pl Meridian ID 83642

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

1561 Ioder Pl Meridian ID 83642

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

Signature of a manager, member or authorized person.

Signature

Gary Fazenbaker

Typed Name: Gary Fazenbaker

Signature

Debra Gaye Fazenbaker

Typed Name: Debra Gaye Fazenbaker

Secretary of State use only

IDAHO SECRETARY OF STATE
09/22/2010 05:00
CK: 1161 CT: 206078 BH: 1239978
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