

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 SEP -8 AM 11: 55

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Sky Line Insulation LLC

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

1119 N. Jefferson

(Street Address)

Sandpoint, Idaho, 83864

(Mailing Address, if different than street address)

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

Jon R. Lafore

(Name)

1119 N. Jefferson

(Street Address)

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

Name

Address

Jon R. Lafore

1119 N. Jefferson Sandpoint Id.
83864

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

1119 N. Jefferson Sandpoint Id. 83864

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

Signature of a manager, member or authorized person.

Secretary of State use only

Signature Jon Lafore

Typed Name: Jon Lafore

Signature _____

Typed Name: _____

W 96221

cert.org, Inc. Rev. 07/2010

IDAHO SECRETARY OF STATE
09/08/2010 05:00
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