

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANIERED 17 AM 10: 16

E TO DE	(instructions c	on back of application)	STATE OF IDAHO	}}
1. The nam	ne of the limited liabi	ility company is:	SIAIE OF IDATIO	
	Spokane St LLC	,		
2. The com		•	nitial designated office:	
(Street Add	dress)			
(Mailing A	ddress, if different than street a	address)		
3. The nam	e name and complete street address of the registered agent:			
	n Sohrweide		2970 N. Lodgepole Rd, Coeur d'Alene, ID 83815	
(Name)		(Street Address)	(Street Address)	
4. The nan		least one member or r	manager of the limited liability	
	Name	0070 11 1	Address	
Deborar	n Sohrweide	eide 2970 N. Lodgepole Rd, Coeur d'Alene, ID 83815		
Paul Sol	hrweide	2970 N. Lodgep	2970 N. Lodgepole Rd, Coeur d'Alene, ID 83815	
<u></u>				
 				
•	address for future co Lodgepole Rd, Coeur d'	orrespondence (annual	report notices):	
207014.	Loagepole No, Octob of	14010, 12 00010		
6. Future e	effective date of filing	(optional):		
•	of a manager, mem	nber or authorized		
person.	8	,	Secretary of State use only	_]
Signature	X Ohru	ilide.	TRIVA GRANDMINU AG OMIMO	
	e: Deborah Sohrweide	· ·	10AHO SECRETARY OF STATE 02/17/2015 05:00 CK:489 CT:260931 BH:14620	187
Signature			10 100.00 = 100.00 ORGAN LI	
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