

251

ORIGINAL


**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

FILED EFFECTIVE

2014 DEC -9 AM 9:40

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

DOUGLAS VANORDEN, LLC

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

1487 PARKWAY DRIVE

(Street Address)

BLACKFOOT, ID 83221

(Mailing Address, if different than street address)

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

Layne VanOrden

(Name)

1487 Parkway Drive, Blackfoot, ID 83221

(Street Address)

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

Name

Address

DOUGLAS VANORDEN

1405 W. 600 S., PINGREE, ID 83262

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

1487 PARKWAY DRIVE, BLACKFOOT, ID 83221

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature 

Typed Name: DOUGLAS VANORDEN

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/09/2014 05:00

CK:2413016 CT:172099 BH:1452231

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