Signature__

Typed Name: _____



251

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 OCT -2 AM 10: 01

Th	ne name of the limited liability con	npany is:	SECRETARY OF STATE STATE OF IDAHO	
	_	STRATEGIC MATERIA	LS NW LLC	
Th	he complete street and mailing addresses of the initial designated/principal office: 12889 STORMY POINT LANE HARRISON, IDAHO 83833			
(Street Address)			
{	Malling Address, if different than street address)			
TI	The name and complete street address of the registered agent:			
	KENNETH MARVIN KRATSCH	12889 STORMY POI	NT LANE HARRISON, ID 83833	
7	Name)	(Street Address)		
	ne name and address of at least o empany:	ne member or mana	ger of the limited liability	
	Name		Address	
_	KENNETH MARVIN KRATSCH	12889 STORMY POI	NT LANE HARRISON, ID 83833	
_		<u> </u>		
•				
-				
-				
M	ailing address for future correspon 12889 STORMY F	idence (annual repor POINT LANE HARRISON		
Fι	iture effective date of filing (option	oal):		
	ture of organizer(s). (An organizer is a n behalf of a member or members).	member, or is		
A 11	in bendan or a memberal.	1/1+ha	Secretary of State use only	
		1/ No. 10-117		
nat	Name: KENNETH MARVIN KRA	KTIMZONI		

