

CERTIFICATE OF ORGANIZATION

LIMITED LIABILITY COMPANY 2013.164 1.
(Instructions on back of application) LIMITED LIABILITY COMPANY (Instructions on back of application)
1. The name of the limited liability company is:
2. The complete street and mailing addresses of the initial designated office: 321 Fuclid Ave. Sandpoint ID, 83864 (Street Address)
(Mailing Address, if different than street address)
3. The name and complete street address of the registered agent: Tacob C. Mulford 321 Euclid Ave. Sandpoint ID 83864 (Street Address)
The name and address of at least one member or manager of the limited liability company:
Name Address Jacob C. Mulford 321 Euclid Ave. Sandpoint ID 83864
Jacob C. Multord 321 Euclid Ave. Sandpoint ID 83864 Neil E. Multord 321 Euclid Ave. Sandpoint ID 83864
5. Mailing address for future correspondence (annual report notices):
321 Euclid Ave. Sandpoint ID 83864
6. Future effective date of filing (optional):
Signature of a manager, member or authorized person.
Secretary of State use only
Signature <u>facel Mulford</u> Typed Name: <u>Jacob Mulford</u>
Signature Mail E Margal
Typed Name: <u>NEIL MULPONO</u> IDANO SECRETARY OF STATE 91/14/2913 95:99 CK: 158 CT: 278144 BH: 1355493
9/21/2012 Cert_org_Uc Rev. 9/2010 1 8 26.96 = 196.96 ORGAN LLC # 2

1 @ 20.00 = 20.00 EXPEDITE C # 3