



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

09 APR -1 AM 8:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Wild Coyote Services, LLC

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

356 USFS 984 Priest River, ID 83856
(Street Address)

PO Box 216 Priest River, ID 83856
(Mailing Address, if different than street address)

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

Chris Knoefler 356 USFS 984 Priest River, ID
(Name) (Street Address) 83856

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

Name	Address
<u>Richard Knoefler</u>	<u>PO Box 216 Priest River, ID 83856</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

PO Box 216 Priest River, ID 83856

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Chris Knoefler
Typed Name: Chris Knoefler

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
04/01/2009 05:00
CK: 1477 CT: 235693 BH: 1163962
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