



0004281095

**STATE OF IDAHO**

Office of the secretary of state, Lawrence Denney

**CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

For Office Use Only

**-FILED-**

File #: 0004281095

Date Filed: 5/12/2021 11:36:09 AM

| Certificate of Organization Limited Liability Company                                                                                                                                                                                                        |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|---------------|---------------------------------------|-----------------|---------------------------------------|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)                                                                                                                                                                                 | Expedited (+\$40; filing fee \$140)                                                                                                                                                                       |      |         |               |                                       |                 |                                       |
| 1. Limited Liability Company Name                                                                                                                                                                                                                            |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| Type of Limited Liability Company                                                                                                                                                                                                                            | Limited Liability Company                                                                                                                                                                                 |      |         |               |                                       |                 |                                       |
| Entity name                                                                                                                                                                                                                                                  | MTH Matco LLC                                                                                                                                                                                             |      |         |               |                                       |                 |                                       |
| 2. The complete street address of the principal office is:                                                                                                                                                                                                   |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| Principal Office Address                                                                                                                                                                                                                                     | 765 OAK STREET<br>POTLATCH, ID 83855                                                                                                                                                                      |      |         |               |                                       |                 |                                       |
| 3. The mailing address of the principal office is:                                                                                                                                                                                                           |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| Mailing Address                                                                                                                                                                                                                                              | PO BOX 276<br>POTLATCH, ID 83855-0276                                                                                                                                                                     |      |         |               |                                       |                 |                                       |
| 4. Registered Agent Name and Address                                                                                                                                                                                                                         |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| Registered Agent                                                                                                                                                                                                                                             | REGISTERED AGENTS INC<br>Commercial Registered Agent<br>Physical Address<br>784 S CLEARWATER LOOP STE R<br>POST FALLS, ID 83854<br>Mailing Address<br>784 S CLEARWATER LOOP STE R<br>POST FALLS, ID 83854 |      |         |               |                                       |                 |                                       |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.                                                                                                                 |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| 5. Governors                                                                                                                                                                                                                                                 |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Michael Hover</td><td>PO BOX 276<br/>POTLATCH, ID 83855-0276</td></tr><tr><td>Elizabeth Hover</td><td>PO BOX 276<br/>POTLATCH, ID 83855-0276</td></tr></tbody></table> |                                                                                                                                                                                                           | Name | Address | Michael Hover | PO BOX 276<br>POTLATCH, ID 83855-0276 | Elizabeth Hover | PO BOX 276<br>POTLATCH, ID 83855-0276 |
| Name                                                                                                                                                                                                                                                         | Address                                                                                                                                                                                                   |      |         |               |                                       |                 |                                       |
| Michael Hover                                                                                                                                                                                                                                                | PO BOX 276<br>POTLATCH, ID 83855-0276                                                                                                                                                                     |      |         |               |                                       |                 |                                       |
| Elizabeth Hover                                                                                                                                                                                                                                              | PO BOX 276<br>POTLATCH, ID 83855-0276                                                                                                                                                                     |      |         |               |                                       |                 |                                       |
| Signature of Organizer:                                                                                                                                                                                                                                      |                                                                                                                                                                                                           |      |         |               |                                       |                 |                                       |
| <u>Riley Park</u>                                                                                                                                                                                                                                            | <u>05/12/2021</u>                                                                                                                                                                                         |      |         |               |                                       |                 |                                       |
| Sign Here                                                                                                                                                                                                                                                    | Date                                                                                                                                                                                                      |      |         |               |                                       |                 |                                       |

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