



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2011 DEC 15 AM 11:08

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Purple Rose

~~Rivercity Ventures, LLC~~

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

3825 N Guy Rd Post Falls, ID 83854

(Street Address)

(Mailing Address, if different than street address)

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

Penny D Dennison

(Name)

3825 N Guy Rd Post Falls, ID 83854

(Street Address)

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

Name

Address

Penny D Dennison

3825 N Guy Rd Post Falls, ID 83854

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

3825 N Guy Rd Post Falls, ID 83854

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

Signature of a manager, member or authorized person.

Signature

Penny D Dennison

Typed Name: Penny D Dennison

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/15/2011 05:00
CK: 65274 CT: 265019 BH: 1301890
1 @ 100.00 = 100.00 ORGAN LLC # 2

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