

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2014 SEP -9 PM 1:53

	(instructions o	n back of application)	SECRETARY OF STATE STATE OF IDAMO	
. The nam	ne of the limited liabi	lity company is:	STATE OF IDAM	
Riot Fab				
The com	plete street and mail	te street and mailing addresses of the initial designated office:		
19897 W	/ Hwy. 53 Rathdrum, ID 8	33858		
(Street Add 4199 W.	dress) Seasons Rd Rathdrum,	ID 83858		
(Mailing Ad	idress, if different than street a	ddress)		
The nam	e and complete stre	et address of the regist	ered agent:	
Richard (Cloward	4199 W. Season	Rd Rathdrum, ID 83858	
(Name)		(Street Address)		
<u>Name</u> Richard Cloward		4199 W. Season	Address 4199 W. Seasons Rd Rathdrum, ID 83858	
<u> </u>	<u> </u>			
				
Mailing a	address for future cor	respondence (annual r	enart natices):	
•	Seasons Rd Rathdrum,	•	oport nonocoj.	
Future et	ffective date of filing	(optional):		
_	f a manager, memi	ber or authorized	TITES	
erson.			Secretary of State use only	
gnature 🗢				
ped Name	: Richard Cloward		10AHO SECRETARY OF ST. 09/09/2014 05:0	
			CK:1024 CT:300964 BH:1	
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ped Name	:		10011001	

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