



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2014 MAY 20 AM 8:40

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

The Smokin' .45, LLC

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

227 Main Street

(Street Address)

Gooding, ID 83330

(Mailing Address, if different than street address)

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

Angela M. Bausch

(Name)

501 4th Ave., East Apt. #4, Gooding, ID 83330

(Street Address)

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

**Name**

**Address**

Angela M. Bausch

501 4th Ave., East Apt. #4, Gooding, ID 83330

Troy A. Richardson

501 4th Ave., East Apt. #4, Gooding, ID 83330

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

501 4th Ave., East Apt. #4, Gooding, ID 83330

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: Angela M. Bausch

Signature

Typed Name: Troy A. Richardson

Secretary of State use only

IDAHO SECRETARY OF STATE

05/20/2014 05:00

CK:1189 CT:297065 BH:1425486

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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