

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAR 25 AM 8: 16

The name of the limited liability comp	pany is: SECTORY OF STATE STATE OF IDAHO S Port of Chance LLC
2. The complete street and mailing addi	resses of the initial designated/principal office:
	Way Middleton, Idaho 83644
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street addre	ess of the registered agent:
Jason Ramsey	9771 Hayden Way Middleton, Idaho 83644
(Name)	(Street Address)
The name and address of at least on company:	e member or manager of the limited liability
<u>Name</u>	Address
Stacy Ramsey	9771 Hayden Way Middleton, Idaho 83644
Jason Ramsey	н
5. Mailing address for future correspond	tence (annual report notices):
<u> </u>	Way Middleton, Idaho 83644
6. Future effective date of filing (options	af):
Signature of organizer(s). (An organizer is a	member, or is
acting in behalf of a member or members).	
10	Secretary of State use only
Signature	
Typed Name: Jason Ramsey	IDAHO SECRETARY OF STATE 103/25/2011 05:00 CK: 1381 CT: 256-81 BH: 1266-854
l	//2008
Signature B. Ru	기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기 기
Typed Name: Stacy Ramsey	CK: 1381 CT: 256981 BH: 1266954

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