



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 APR 29 AM 9:28

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Top Flight, LLC

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

13009 Leland Dr, Donnelly, ID 83615

(Street Address)

PO Box 336, Donnelly, ID 83615

(Mailing Address, if different than street address)

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

Beau Value

(Name)

13009 Leland Dr, Donnelly, ID 83615

(Street Address)

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

**Name**

**Address**

Kevin Jones

12829 Gooseneck Ct, Donnelly, ID 83615

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

PO Box 336, Donnelly, ID 83615

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Kevin Jones

Typed Name: Kevin Jones

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008

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04/29/2010 05:00  
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