



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 JAN 24 AM 9:14

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

NAGLE SHARPLES, LLC

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

1850 E. Seltice Way, Post Falls, ID 83854

(Street Address)

(Mailing Address, if different than street address)

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

WitherspoonKelleyDavenport&Toole

(Name)

608 Northwest Blvd., Ste. 300, Coeur d'Alene, ID 83814

(Street Address)

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

**Name**

**Address**

Lee Nagle

12387 North Nine Bark Road, Hauser, ID 83854

Brad Sharples-Faucher

North 3015 Sand Trap Way, Post Falls, ID 83854

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

c/o Witherspoon Kelley, 608 Northwest Blvd., Ste. 300, Coeur d'Alene, ID 83814

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Lee Nagle

Signature

Typed Name: Brad Sharples-Faucher

Secretary of State use only

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01/24/2011 05:00  
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