

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

CERTIFICATE OF		N S
LIMITED LIABILITY (Instructions on back		08 SEP -2 AM II: 07
he name of the limited liability con	npany is: Stack Pock La	SECRETARY OF STATE STATE OF IDAHO
he complete street and mailing add		esignated/principal office:
(Mailing Address, if different than street address) The name and complete street addr	ress of the registered a	gent:
Brian J. Graham	380 North Clearpo	int Way, Eagle, ID 83616
(Name)	(Guest Mudress)	
The name and address of at least o	ne member or manage	Address
The name and address of at least or company:  Name  Brian J. Graham	ne member or manage  380 North Clearpo	Address hint Way, Eagle, ID 83616
The name and address of at least or company:  Name	ne member or manage 380 North Clearpo 125 Burton Ct	Address
The name and address of at least or company:  Name Brian J. Graham  David A. Graham  Cindy E. Graham  Mailing address for future correspon	380 North Clearpo 125 Burton Ct 380 North Clearpo	Address int Way, Eagle, ID 83616  Danville, CA 94526 int Way, Eagle, ID 83616  notices):
The name and address of at least or company:  Name Brian J. Graham  David A. Graham  Cindy E. Graham  Mailing address for future correspon	380 North Clearpo  125 Burton Ct  380 North Clearpo  126 Burton Ct  380 North Clearpo  adence (annual report nearpoint Way, Eagle, ID 836	Address int Way, Eagle, ID 83616  Danville, CA 94526 int Way, Eagle, ID 83616  notices):

Signature \_\_\_\_

Typed Name:

IDAHO SECRETARY OF STATE
09/02/2008 05:00
CK: 1185 CT: 229358 BH: 1134861
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