

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 MAR -8 AM 9: 08

1. The n	The name of the limited liability company is:		SECREPAIN OF LAME
	Rap	id River Outfitters, LLC	STATE (IF (DIEV)
913 N (Street PO B	omplete street and mailing ac I. MacArthur Ave. Riggins, ID 8354! Address) ox 402, Riggins, ID 83549 g Address, if different than street address)		esignated office:
3. The name and complete street address of the registered agent:			
Roy A		913 N. MacArthur Ave, F (Street Address)	Riggins, ID 83549
4. The na	ame and address of at least o	one member or manage	er of the limited liability
	<u>Name</u>		<u>Address</u>
Roy A	kins	913 N. MacArthur Ave, F	Riggins, ID 83549
Karer	Akins	913 N. MacArthur Ave, Riggins, 1D 83549	
5. Mailin	. Mailing address for future correspondence (annual report notices):		
PO B	ox 402, Riggins, ID 83549		
6. Future	effective date of filing (option	nal):	
Signature person.	of a manager, member of	authorized	
•	a w		Secretary of State use only
Signature	Tolfkins		
Typed Na	me: Roy Akins		
Signature Typed Nar	me: Karen Akins		IDAHO SECRETARY OF STATE @3/08/2012 @5:00 CK: 3735 CT: 267960 BH: 1314199 1 @ 100.00 = 100.00 ORGAN LLC # 2