



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP 29 AM 9:06

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

THE FAMILY TRUST, LLC

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

102 1ST AVENUE, COUNCIL, ID 83612

(Street Address)

PO BOX 72, COUNCIL, ID 83612

(Mailing Address, if different than street address)

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

ALLEN D JENKINS

(Name)

102 1ST AVENUE, COUNCIL, ID 83612

(Street Address)

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

Name

Address

ALLEN D JENKINS

102 1ST AVENUE, COUNCIL, ID 83612

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

PO BOX 72, COUNCIL, ID 83612

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: ALLEN D JENKINS

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
09/29/2010 05:00
CK: 1009 CT: 251614 BH: 1248872
1 @ 100.00 = 100.00 ORGAN LLC # 2

W96769