To: 12083342080 From: 12143052508 Date: 11/27/17 Time: 1:24 PM Page: 04/05



Printed Name: -

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2017 NOV 27 PM 3: 15

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE

FILED EFFECTIVE

Complete and sub	nit the application in <u>duplicate</u> .	STATE OF IDAHO	
The name of the limited liab	oility company is:		
SNOW RANGE NATURAL	SLLC		
(Remember to include the	words "Limited Liability Company," "Limited	Company," or the abbreviations L.L.C., LLC, or L.C.)	
The complete street and m	ailing addresses of the principal	office is:	
1425 Wood View_Rd., San	dpoint, ID 83864		
(Street Address)			
(Maning Address; if different)			
The name of the registered	agent and the street address of	the registered agent:	
Kem Davis	1425 Wood View Rd	1425 Wood View Rd., Sandpoint, ID 83864	
(Name)	(Appress cannot be a post offic	e cex or postal mail box)	
The name and address of a	it least one governor of the limite	ed liability company:	
KEM DAVIS	1425 WOOD VIEW RD., SANDPOINT, ID 83864		
(Name)	(Address)		
CHRIS DAVIS	1425 WOOD VIEW RD., SANDPOINT, ID 83864		
(Name)	(Appress)		
(Name)	(Appress)		
(Name)	(Address)		
Mailing addings for five man		ational:	
1425 Wood View Rd., San	orrespondence (annual report n dpoint, ID 83864	onces).	
(Address)			
nature of organizer(s).			
nature: <u>AMA KUM</u>		Secretary of State use only IDAHO SECRETARY OF STATE	
	/	11/27/2017 05:00	
nted Name: Nancy Luna		CK:15452754 CT:172099 BH:1613681 16 100.00 = 100.00 ORGAN LLC #2	
nature:		W192455	
		WINT	