



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 JUL -5 PM 4:22

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

Rowe Rowe Rowe Your Boat LLC

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

3879 S. Taylorview Ln. Ammon, ID 83406

(Street Address)

(Mailing Address, if different than street address)

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

Rebecca L. Rowe

(Name)

3879 S. Taylorview Ln Ammon ID 83406

(Street Address)

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

Name

Address

Zachary J. Rowe3879 S. Taylorview Ln Ammon ID 83406Rebecca L. Rowe3879 S. Taylorview Ln Ammon ID 83406

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

3879 S. Taylorview Ln Ammon ID 83406

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person:

Signature

Rebecca L. Rowe

Typed Name

Rebecca L. ROWE

Signature

ZJR

Typed Name

ZACHARY J. ROWE

Secretary of State Use Only

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07/05/2013 05:00
CK: 1467467 CT: 172099 BH: 1381037
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