

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 JUL 28 PM 1: 37

SECRETARY OF STATE STATE OF IDAHO

. The n	ame of the limited liability co	ompany is:		STATE OF IDAHO
	·	The Grass Gato	or, LLC.	
2. The c	The complete street and mailing addresses of the initial designated/principal office:			
(Street	Address) 709 Vi	illage Lane Bois	e, ID 83702	
(Mailing	g Address, if different than street address)			
3. The na	The name and complete street address of the registered agent:			
70.	Kenny Walker	***	709 Village Lane Boise,	ID 83702
(Name	)	(Street Addre	ss)	
4. The na	ame and address of at least any:	one member	or manager of the li	mited liability
	Name		Address	
	Kenny Walker	· ·	709 Village Lane Boise, ID 83702	
		·.		
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5. Mailing	g address for future correspo	ondence (ann Same As Abo	The state of the s	
<del></del>				
3. Future	effective date of filing (optio	nal):		
ignature o	of organizer(s). (An organizer is all of a member or members).	a member, or is		
			Secretary	of State use only
Signature_	Kinnywalkin	<u> </u>	Rc.PN	
yped Nan	ne: Kenny Walk	er	400	
			07.20008 07.20008 07.136	DAHO SECRETARY OF STATE '28/2008 05:0
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Typed Nan  Signature_  Typed Nan		er	CK: 136	/28/2008 05 415 CT: 172099 BH: