

Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

no MOV 20 AM IO: 23

	(Instructions on back of application)		2008 NUV ZU AN IO. ZO	
1.	The name of the limited liability	company is:	SECRETARY OF STATE STATE OF IDAHO	
		The Table Company LLC.		
2.	The complete street and mailing addresses of the initial designated/principal office: 210 N. 4th Ave Pocatello ID, 83201			
	(Street Address) PO Box 41 Arimo, ID 83214			
	(Mailing Address, if different than street addres	\$)		
3.	The name and complete street address of the registered agent:			
	Chris Larsen	245 Woodland	d Ave. Arimo, ID 83214	
	(Name)	(Street Address)		
4.	The name and address of at least one member or manager of the limited liability company:			
	Name		Address	
	Chris Larsen	245 Woodland	245 Woodland Ave. Arimo, ID 83214	
		-		
5.	Mailing address for future correspondence (annual report notices):			
	210 N. 4th Ave Pocatello ID, 83201			
6.	Future effective date of filing (optional):			
	nature of organizer(s). (An organizer i g in behalf of a plember of prembers).	is a member, or is		
		<u>.</u>	Secretary of State use only	
-	ature Mus Muse	- February Control		
Туре	ed Name: Chris Larsen			
Sign	ature	LC formations, ong. R. Plads		

IDAHO SECRETARY OF STATE

11/20/2008 05:00

CK: 172245 CT: 172099 BH: 1145308

1 0 100.00 = 100.00 ORGAN LLC # 2

1 0 20.00 = 20.00 EXPEDITE C # 3

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