

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

10 OCT 15 AM 9: 01

1. The name of the limited liability company is: TEFF BROWN CONSTRUCTION LL.C.	NE TON	(Instructions on bac	k of application)	0.77.	1 - mail 0.5 0-1	
2. The complete street and mailing addresses of the initial designated/principal office: IDL CHOCOLATE GUICH RD KETCHUM TOATHO 83340	1. The name	The name of the limited liability company is:				
CHOCOLATE GUICH RD KETCHUM TDAHO 8734D	_TEI	FF BROWN COM	ISTRUCT 10	N LLC	<u>, </u>	
(Naming Address, if different than street address) 3. The name and complete street address of the registered agent: TEFRIE 5. BROWN IOC CHOCLATE CHICH RD. KSTCHUM (Name) RStreet Address) RSTCHUM (Name) RSTCHUM (Street Address) RSTCHUM (Name) RST	2. The comp	lete street and mailing a	ddresses of the i	nitial designated/ _l	principal offic	ce:
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3. The name and complete street address of the registered agent: TEFRIE S. BROWN IDG LIGOUATE GALCH RD. BSTEPHUM (Street Address) TO B 27440 The name and address of at least one member or manager of the limited liability company: Name Address	(Street Addre <u>P.O., I</u> (Mailing Add	ess) 50 X 	CHUM ID.	83340		
4. The name and address of at least one member or manager of the limited liability company: Name Address JERIE 5. BROWN D6 CHECKER ALLEN BD. KERLIUM ED. 8314D 5. Mailing address for future correspondence (annual report notices): P.O. BOK 2196 KETCHUM TO. 8334D 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Signature FIFE 5. BROWN Signature Typed Name: JEFRIE 5. BROWN Signature IDANO SECRETARY OF STATE 12/15/2010 95:208 D8:2839 EN: 12/3288 BH: 12/32881						
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Signature Typed Name: Name Address	4. The name					67710
5. Mailing address for future correspondence (annual report notices): P.O. BOX 2196 KETCHUM TO. 833-40 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Signature Figure 1. Drawn Typed Name: JEFRIE 5. BROWN Signature Sig				•	,	
5. Mailing address for future correspondence (annual report notices): P.O. BOK 2/96 KETCHUM TO. 83340 Signature of a manager, member or authorized person. Signature	والمراجع والمناطقين		144 - 646			
P.O. Box 2196 KETCHUM TO. 83340 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Secretary of State use only Signature Typed Name: TEFRIE 5. BROWN Signature 10/15/2010 05:00 CK: 2839 CT: 252838 BH: 1243261	al total	2 3. BROWN	106 CALL	CATE BUILD	TO	83340
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Signature of a manager, member or authorized person. Signature Si	P.O. P.	BOX 2196 K	ETCHUM J	D. 83342)	
Signature Signat	6. Future effe	ective date of filing (option	onal):			
Signature Signat						
Signature Signat	•	a manager, member o	r authorized			
Typed Name: <u>JEFRIE S. BROWN</u> Signature IDAHO SECRETARY OF STATE 10/15/2010 05:00 CK: 2839 CT: 252030 BH: 1243201	person.	1		Secretary of	of State use only	
Signature IDAHO SECRETARY OF STATE 10/15/2010 05:00 CK: 2839 CT: 252030 BH: 1243201	Signature (Dexrie A. Brow	us			
Signature 10/15/2010 05:06 CK; 2839 CT; 252030 BH; 1243201 CK; 2839 CT; 2830 CK; 283	Typed Name:	JEFRIE S. BR	OWN			
Typed Name: CK: 2639 CT: 252030 BH: 1243201	Signature			IDAK	SECRETARY OF S	STATE 15 : 00
				CK: 2839 CT: 252030 BH: 1243201		

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