

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 AUG 26 PM 2: 07

		or approauting	OF Other to a for the
. Th	e name of the limited liability co	ompany is:	SECRETARY OF STATE OF IDA
••••		Kansas Winds LLC	
The	e complete street and mailing a	ddresses of the initial des	ignated/principal office
72.		Creek Place, Meridian, Idaho 8	33642
(SI	treet Address)		
(M	failing Address, if different than street address)		
The	The name and complete street address of the registered agent:		
	Tom Fetzer	4255 S. Nickel Creek Pl	ace, Meridian, Idaho 83642
(N	ame)	(Street Address)	
	e name and address of at least (		of the Booken Bakille.
cor	npany:	one member or manager	•
cor	npany:  Name  Pacific Winds LLC	<b>A</b>	of the fimited liability Idress ace, Meridian, Idaho 83642
cor	npany: <u>Name</u>	<b>A</b>	ldress
cor	npany: <u>Name</u>	<b>A</b>	ldress
	Name Pacific Winds LLC  iling address for future correspo	4255 S. Nickel Creek Plants	idress ace, Meridian, Idaho 83642 tices):
	Name Pacific Winds LLC  iling address for future correspo	4255 S. Nickel Creek Pla	idress ace, Meridian, Idaho 83642 tices):

acting in behalf of a member or members).

Signature\_\_\_\_

Typed Name: \_\_Tom Fetzer, V.P., Pacific Winds LLC

Signature\_

Typed Name:

Secretary of State use only