

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2011 MAY 27 AM 11: 11

W W	(instructions on Da	ck of application)	STATE OF IDAHO
1.	The name of the limited liability of	ompany is:	VIAL OF IDANO
	1	Zipper Initiative, LLC	
2.	The complete street and mailing addresses of the initial designated/principal office: 1023 Woodview, Sandpoint, Idaho 83864		
	(Street Address) P.O. Box 591, Sandpoint, Idaho 83864 (Malling Address, if different than street address		
3.	The name and complete street address of the registered agent:		
	Elizabeth Hughes	1023 Woodview, Sandpo	nt, Idaho 83864
	(Name)	(Street Address)	•
	The name and address of at least one member or manager of the limited liability company:		
	Name	<u>Address</u>	
	Elizabeth Hughes	P.O. Box 591, Sandpoint, Idaho 83864	
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5. I	Mailing address for future correspo	ondence (annual report n	ouces).
	P.O. Box 591, Sandpoint, Idaho 83864	<del></del>	
6	Future effective date of filing (option	onal):	
Sign pers	ature of a manager, member o	r authorized	
here	co 1.1611 0		Secretary of State use only
Sign	ature The die to the		
_	ed Name: Elizabeth Hughes		
Sign	ature		TRAIN CEPTETANY OF STATE
•	d Name:		IDAHO SECRETARY OF STATE <b>65/27/2011 05:00</b> CK: 689279 CT: 172099 BH: 1275774
			1 @ 100.00 = 100.00 ORGAN LLC # 2

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