

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 JAN 12 AM 9: 19

1. 7	The name of the limited liability compa	any is:	SECRETARY OF STATE STATE OF IDAHO	
2. 1	2. The complete street and mailing addresses of the initial designated/principal office:  208 N Main St, Troy, ID 83871			
	(Street Address) P.O. Box 298, Troy, ID 83871			
	(Mailing Address, if different than street address)			
3. 1	The name and complete street address of the registered agent:			
	Kevin E. Greenway	208 N Main, Tr	oy, ID 83871	
	(Name)	(Street Address)	•	
	The name and address of at least one member or manager of the limited liability company:			
	Name	Addı	<del></del>	
	Kevin E. Greenway	208 N Main, Tr	oy, ID 83871	
	Georgia Merlene Greenway 208 N Main, Troy, ID 83871			
*,				
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5. ř	<ol> <li>Mailing address for future correspondence (annual report notices):</li> <li>P.O. Box 298, Troy, ID 83871</li> </ol>			
1 .0. 50, 200, 110,, 15				
6. F	Future effective date of filing (optional)			, 
				est i State
Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).				
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Signature Kern E. Delemon 3				
Typed Name: Kevin E. Greenway				
Signature Keyin E. Boloway  Typed Name: Kevin E. Greenway  Signature Of State  (CK: 5868 CT: 232980 BH: 1151754  1 9 198.86 = 199.88 EXPEDITE C # 3				
Туре	ed Name: <u>Georgia Merlene Greenwe</u>	Revise Revise	1 6 50.00 = 50.00 E	XPEDITE C # 3

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