

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2010 JUL 12 PH 3: 09

FILED EFFECTIVE

(Instructions on back of application)

(IIIouro	onono on buck of application)	SECKETARY OF STATE	
1. The name of the limi	ited liability company is:	STATE OF IDAHO	
	Thomas Dean, LLC		
2. The complete street a 609 6th Ave., Deary, Ida (Street Address) PO Box 201, Deary, Ida	<u> </u>	designated/principal office:	
(Mailing Address, if different t			
3. The name and comp	lete street address of the registered	agent:	
Thomas Dean	609 6th Ave. Deary, Id	609 6th Ave. Deary, Idaho 83823	
(Name)	(Street Address)		
The name and addre company: Name Thomas Dean	ss of at least one member or manag t 609 6th Ave. Deary, Id	Address	
monips bean	000 011 740. Dealy, to	<u> </u>	
5. Mailing address for for PO Box 201, Deary, Ida	uture correspondence (annual repor	t notices):	
FO BOX 201, Dealy, Ide	110 03023		
6. Future effective date	of filing (optional):		
Signature of a manage	er, member or authorized		
person.	\ ·	Secretary of State use only	
Signature Juson 4	Chilson		
Typed Name: Susan R. W	ilson, Attorney		
Signature			
Typed Name:	Į.		
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07/13/2010 05:00 CK: 475135 CT: 172099 BH: 1230375 1 0 100.00 = 100.00 ORGAN LLC #

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