

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

	(Instructions on back	k of application)	10 SEP 30 AM 8: 10
1.	The name of the limited liability company is:		CECEST OV OF CIATE
	DRIV	EWAY PARTNERS LLC	SECFE ARY OF STATE STATE OF IDAHO
2.	The complete street and mailing ad 111 W. 6th Street, Ketchum, Idaho 8334	_	ated/principal office:
	(Street Address) P.O. Box 3006, Ketchum, Idaho 83340 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Peter J. Dembergh	111 W. 6th Street, Ketchum, Idaho 83340	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name	Address	
	Peter J. Dembergh	P.O. Box 1503, Ketchum, Idaho 83340	
	Barbara S. Dembergh	P.O. Box 1503, Ketchum, Idaho 83340	
	Stephen E. Riley	P.O. Box 5679, Ketchum, Idaho 83340	
_	Marillon and done of the second		
5.	Mailing address for future correspor P.O. Box 1503, Ketchum, Idaho 83340	ndence (annual report notice	es):
6.	Future effective date of filing (option	nal): October 1, 2010	
Sig	nature of a manager, member or son.		
	nature / ////	Sec	cretary of State use only
Тур	ed Name: John A. Seiller, Organizer		
Sigr	nature		IDAHO SECRETARY OF STATE 0/30/2010 05:00
Тур	ed Name:	CK: 1 2 1	5958 CT: 50696 BH: 1241105 00.00 = 100.00 ORGAN LLC # 2

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