

Signature_

Typed Name: _

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

09 JUNII AM 8: 5

\$ 01.78V	(Instructions on back of	f application)	30 ATT AN 8: 57
. The nam	e of the limited liability comp	any is:	SECRETARY OF STATE STATE OF IDAHO
		& COMPANY, LLC	OHILL OF IDAHO
. The com	plete street and mailing addre	esses of the initial of	designated/principal office:
		WEST, MALAD CITY, I	D 83252
(Street Add	ress) PO BOX 2227, CAL	JFORNIA CITY, CA 93	504-0227
, -	dress, if different than street address)		
. The nam	e and complete street addres	s of the registered	agent:
	SCOTT LARSEN	388 NORTH 3900 V	VEST, MALAD CITY, ID 63252
(Name)		(Street Address)	
. The nam company		member or manaç	·
	<u>Name</u> DAVID W. EVANS	Address 9669 DENHART AVE, CALIFORNIA CITY, CA 93505	
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			h 41 a).
5. Mailing a	address for future correspond PO BOX 2227, CAL	ence (annual repor .IFORNIA CITY, CA 93	•
e			-
3. Future e	ffective date of filing (optional):	IMMEDIATELY
_	organizer(s). (An organizer is a m	nember, or is	•
cung in benaii	of a member of members).	Λ	Secretary of State use only
ignature	May Co. 10001		
yped Name	DAVID W. EVANS	Zimekcert_org_kc.PulD	11 Odin1
		90g	W 84626