

06 FEB -3 PM 3: 15

(Instructions on back of application)

1.	The name of the limited liability comp hoku'akua, LLC	pany is:	STATE OF IDAHO
2.	The street address of the initial registered office is:		
	205 Sunrise Dr; Mountain Home, ID 83647		
	and the name of the initial registered	agent at the above addres	ss is:
	John L. Keebaugh		
3.	. The mailing address for future correspondence is:		
	205 Sunrise Dr; Mountain Home, ID 83647		
4.	Management of the limited liability company will be vested in:		
	Manager(s) ☐ or Member(s) ✓		ox)
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.		
	Name	Address	
	John L. Keebaugh	205 Sunrise Dr; Mounta	ain Home, ID 83647
	Charleen Keebaugh	205 Sunrise Dr; Mounta	ain Home, ID 83647
	Signature of at least one person resp	onsible for forming the lim	ited liability company:
	Signature: John Keebaugh	gli g	Secretary of State use only
	TypedName: <u>John L. Keebaugh</u> Capacity: <u>Member</u>	ınızation	
	Capacity, Mondo	OpviormstLt.Cformstartsoforganization.p85 Revised 07/2002	PP17129
	Signature (Law Veen Xx che	range to the state of the state	TRAUG CECOSTADA DE ATAT
	Typed Name: Charleen Keebaugh	Comst.LC forms.	IDAHO SECRETARY OF STATI 92/93/2096 95:
	Capacity: Member	Spiritor Re	CK: 3004 CT: 196653 BH: 9 1 0 100.00 = 100.00 ORGAN I