



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 MAR 31 PM 12:58

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Ascente II, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

PO Box 866

(Street Address)

Ketchum, Idaho 83340

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Peter W. Stommel

(Name)

360 East Avenue N., Ketchum, Idaho 83340

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name	Address
<u>Peter W. Stommel</u>	<u>PO Box 866 Ketchum, Idaho 83340</u>
<u>Suzan L. Stommel</u>	<u>PO Box 866 Ketchum, Idaho 83340</u>
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):

PO Box 866

Ketchum, Idaho 83340

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Peter W. Stommel

Signature

Typed Name: Suzan L. Stommel

Secretary of State use only

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03/31/2009 05:00  
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Revised 07/2008

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