

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application) 2014 OCT 16 AM 9: 01

1. The name of the limited liabil	STATE OF IDAHO
	Purple Sage Paints, LLC
•	ing addresses of the initial designated office:
641 Red Cloud Rd., Bonners Ferr	y, ID 83805
(Street Address)	
(Mailing Address, if different than street ad	ddress)
3. The name and complete stree	et address of the registered agent:
Time along D. Miller and	7174 Main St.
Timothy B. Wilson (Name)	Bonners Ferry, ID 83805 (Street Address)
(Name)	(Street Address)
	least one member or manager of the limited liability
company:	Address
Name	
Kelly A. Wilson	641 Red Cloud Rd., Bonners Ferry, ID 83805
5 Mailing address for future con	respondence (annual report notices):
-	·
641 Red Cloud Rd., Bonners Ferr	y, ID 83805
0 5 4 66 6 14 666	4
6. Future effective date of filing	(optional):
Signature of a manager, mem	er or authorized
person.	
	Secretary of State use only IDAHO SECRETARY OF STATE
Signature //	10/16/2014 05:00
Typed Name: Timothy B. Wilson	CK:1370 CT:302178 BH:144
	1@ 100.00 = 100.00 ORGAN L 1@ 20.00 = 20.00 EXPEDITE
Signature	
Typed Name:	
* 3	