

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Signature:

Printed Name: ---

		Title 30, Chapters 21 Filing fee: \$100 type		ANY MINARIS AND EFFECTIVE	
	The name	Complete and submi e of the limited liabili	t the application in <u>duplica</u> ity company is:	IG. I STO	
•					
	(Remember to include the w	ords "Limited Liability Company,"	"Limited Company," or the abbreviations L.L.C., LLC, or LC)	
: .	The complete street and mailing addresses of the principal office is: 5965 E. King Road, Hayden, ID				
	(Street Address) P.O. Box 338, Hayden, ID 83835-0338				
	(Mailing Address if different)				
3.	The name of the registered agent and the street address of the registered agent:				
	Lani McMahon		5965 E. King F	5965 E. King Road, Hayden, ID	
	(Name)		(Address cannot be a	post office box or postal mail box.)	
•	Lani McMahon F		P.O. Box 338,	e governor of the limited liability company: P.O. Box 338, Hayden, ID 83835-0338	
	(Manne)		(Address)		
	(Name)		(Address)	(Address)	
	(Name)		(Address)	(Address)	
	(Namé) (/		(Address)	(Address)	
	Mailing address for future correspondence (annual report notices): P.O. Box 338, Hayden, ID 83835-0338				
	(Addres:	S1			
Siar	nature of c	organizer(s).			
_		A. h) 7-	Secretary of State use only	
	iature:	Lani MaMahan) h	10AHO SECRETARY OF STATE 03/13/2017 05:00	
Prin	ted Name	Lani McMahon		CK:2514 CT:336082 BH:1573441 10 100.00 = 100.00 ORGAN LLC #10	

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