

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

CERTIFICATE OF C	· Str.
(Instructions on back	of application) $S_{14/5}^{NA}$ 9.
1. The name of the limited liability con	npany is:
Third Street Rental LLC	
The complete street and mailing add     14519 N Cincinnati, Spokane WA 99208     (Street Address)	dresses of the initial designated office:
(Mailing Address, if different than street address)	
3. The name and complete street address of the registered agent:	
August Fawkes	741 Kentucky Ave, Hayden ID 83835
(Name)	(Street Address)
The name and address of at least o company:	ne member or manager of the limited liability
<u>Name</u>	Address
M Smith	PO Box 864 Post Falls, ID 83877
Mailing address for future correspondence (annual report notices):  PO Box 864 Post Falls ID 83877	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
Signature <u>August fawka</u> Typed Name: <u>August Faw</u>	Secretary of State use only  KLS
SignatureTyped Name:	CV. 5525 CT. 186183 1049 1426604

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