FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 AUG 21 AM 9: 07

•		
1. The name of the limited liability com	pany is:	
LocKey U Outfitters LLC		
 The complete street and mailing add 2141 Old White Bird Hill Road, Grangeville 		initial designated office:
(Street Address) PO Box 392 Grangeville Idaho 83530 (Mailing Address, if different than street address)		
3. The name and complete street addre	ess of the regi	stered agent:
Frank Schmitz	2141 Old White	e Bird Hill Road, Grangeville Idaho 83530
(Name)	(Street Address)	
 The name and address of at least or company: Name 	ne member or	manager of the limited liability
Robert Hvinden	PO Box 2760.	Williston, ND 58802
5. Mailing address for future correspond	dence (annua	l report notices):
PO box 2760 Williston, \$D 58802		
6. Future effective date of filing (options	al):	
signature of a manager, member or erson.	authorized	
Signature Thus		Secretary of State use only
yped Name: Frank Schmitz		IDAHO SECRETARY OF STA 08/21/2014 05:0
Signature		CK:1018 CT:124923 BH:14
Typed Name:		16 100.00 = 100.00 ORGAN

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