

FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAR -3 AM 8:45

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Steiner Enterprises, LLC.

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

2034 Powers Ave. Space #25  
(Street Address)Lewiston, ID 83501  
(Mailing Address, if different than street address)

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

Delbert Steiner  
(Name)2034 Powers Ave. Space #25  
(Street Address) Lewiston, ID 83501

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

Name	Address
<u>Matthew Steiner</u>	<u>903 1/2 #2 6th St. Clarkston, WA 99403</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

2034 Powers Ave. Space #25 Lewiston, ID 83501

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

Signature of a manager, member or authorized person.

Signature Matthew Steiner  
Typed Name: Matthew SteinerSignature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/03/2011 05:00  
CK: 210001957 CT: 256132 BN: 1262502  
1 @ 100.00 = 100.00 ORGAN LLC # 2

W101065