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CERTIFICATE OF OR LIMITED LIABILITY (Instructions on back of a 1. The name of the limited liability compan Westwood	COMPANY pplication)	FILED EFFECTIVE 09 FEB 26 AM 8: 49 SECRETARY OF STATE STATE OF IDAHO
2. The complete street and mailing addresses of the initial designated/principal office:		
2. The complete street and maining addresses of the initial designated/principal onice. 15825 N. Westwood Dr., Rathdrum, ID 83858		
(Street Address)		
	<u></u>	
(Mailing Address, if different than street address)		
3. The name and complete street address	of the registered agent	
Steven E. Bockelman	15825 N. Westwood Dr.,	Rathdrum, ID 83858
	reet Address)	
4. The name and address of at least one m	ember or manager of	the limited liability
company:		
<u>Name</u> Susan Bockelman	Address 15825 N. Westwood Dr., Rathdrum, ID 83858	
	15020 N. Westwood DI.,	
<u> </u>		
5. Mailing address for future correspondent 15825 N. Westwood	ce (annual report notic 1 Dr., Rathdrum, ID 83858	
6. Future effective date of filing (optional):	April 1	, 2009
o. I diale checuve date of ming (optional).		· · · · · · · · · · · · · · · · · · ·
Signature of organizer(s). (An organizer is a merr acting in behalf of a member or members).		cretary of State use only
Signature Anden Bochumen	L. PMC	
Typed Name: Susan Bockelman		
		IDAHO SECRETARY OF STATE
Signature	0120	CK: 2943 CT: 234512 BM: 1158727
Typed Name:	128	A T 100.00 = 100.00 ORGAN LLC 0 2
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