

251

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 APR 12 AM 11:24

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

KONKOL LUMBER, LLC

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

329 INDEPENDENCE LANE, OROFINO, ID 83544

(Street Address)

P.O. BOX 323, OROFINO, ID 83544

(Mailing Address, if different than street address)

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

DONALD J. KONKOL

(Name)

329 INDEPENDENCE LANE, OROFINO, ID 83544

(Street Address)

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

Name

Address

GREGORY P. KONKOLP.O. BOX 323, OROFINO, ID 83544DONALD J. KONKOLP.O. BOX 323 OROFINO, ID 83544

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

P.O. BOX 323, OROFINO, ID 83544

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: GREGORY P. KONKOL

Secretary of State use only

Signature _____

Typed Name: _____

enLong Jo Rev. 07/2010

IDAHO SECRETARY OF STATE
 04/12/2012 05:00
 CK: 961148 CT: 172899 BH: 1319478
 1 @ 100.00 = 100.00 ORGAN LLC # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3

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