

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY OF THE COMPANY OF THE

The so	(Instructions on back	of application) SECRETARY OF STATE STATE OF IDAHO
1. T	he name of the limited liability cor	mpany is:
Hemingway's Blind, LLC		
	he complete street and mailing ad 36 Dennigton Pl., New Canaan, CT 0684 Street Address)	dresses of the initial designated office:
Ī	Mailing Address, if different than street address)	
3. TI	The name and complete street address of the registered agent:	
	Michael D. Pogue	675 Sun Valley Road, Suite A, Ketchum, ID 83340 (Street Address)
4. Th	The name and address of at least one member or manager of the limited liability company:	
<u>.</u>	<u>Name</u> like McGavick	Address 36 Dennigton Pl., New Canaan, CT 06840
5. Mailing address for future correspondence (annual report notices): Lawson Laski Clark & Pogue, PLLC, PO Box 3310, Ketchum, Idaho を3340		
6. Futi	ure effective date of filing (optional):
Signatu person.	re of a manager, member or a $\mathcal I$	
Signatur	e Mh	Secretary of State use only
Typed N	ame: Michael D. Pogue	IDAHO SECRETARY OF STATE 12/06/2012 05:00 CK: 2963 CT: 159456 BH: 1350183 1 8 188.88 = 188.88 ORGAN II.C # 2
	e	1 5 100.00 = 100.00 ORGAN FTC # 5
Typed N	ame:	IDAHO SECRETARY OF STATE

9/21/2012

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IDAHO SECRETARY OF STATE
12/06/2012 05:00
CK: 2964 CT: 159456 BH: 1350185
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