



**STATE OF WASHINGTON
SECRETARY OF STATE**

**APPLICATION TO FORM A
LIMITED LIABILITY COMPANY**

(Per Chapter 25.15 RCW)

FEE: \$175

- Please PRINT or TYPE in black ink
- Sign, date and return original AND ONE COPY to:

CORPORATIONS DIVISION
801 CAPITOL WAY SOUTH • PO BOX 40234
OLYMPIA, WA 98504-0234

- BE SURE TO INCLUDE FILING FEE. Checks should be made payable to "Secretary of State"

FILED
SECRETARY OF STATE
SAM REED

3/10/04

FOR OFFICE USE ONLY

FILED

CORPORATION NUMBER:

EXPEDITED (24-HOUR) SERVICE AVAILABLE - \$20 PER ENTITY
INCLUDE FEE AND WRITE "EXPEDITE" IN BOLD LETTERS
ON OUTSIDE OF ENVELOPE

UB: **602-376-951**

Important! Person to contact about this filing

Ryan Gibson

Daytime Phone Number (with area code)

480-558-2075

CERTIFICATE OF FORMATION

NAME OF LIMITED LIABILITY COMPANY (LLC) (Must contain the word "Limited Liability Company," "Limited Liability Co.," "LLC," or "LLC")

Centennial Star Management, LLC.

ADDRESS OF LLC'S PRINCIPAL PLACE OF BUSINESS

Street Address (Required) 234 N Oak Street City Colville State WA ZIP 99114

PO Box (Optional - Must be in same city as street address) _____ ZIP (If different than street ZIP) _____

EFFECTIVE DATE OF LLC (Specified effective date may be up to 90 days AFTER receipt of the document by the Secretary of State)

- ☐ Specific Date: _____ ☒ Upon filing by the Secretary of State

DATE OF DISSOLUTION (If applicable)

MANAGEMENT OF LLC IS VESTED IN ONE OR MORE MANAGERS

- ☒ Yes ☐ No

>>> PLEASE ATTACH ANY OTHER PROVISIONS THE LLC ELECTS TO INCLUDE <<<

NAME AND ADDRESS OF WASHINGTON STATE REGISTERED AGENT

Name George M. Carnie

Street Address (Required) 234 N Oak Street City Colville State WA ZIP 99114

PO Box (Optional - Must be in same city as street address) _____ ZIP (If different than street ZIP) _____

I consent to serve as Registered Agent in the State of Washington for the above named LLC. I understand it will be my responsibility to accept Service of Process on behalf of the LLC; to forward mail to the LLC; and to immediately notify the Office of the Secretary of State if I resign or change the Registered Office Address.

George M Carnie George M Carnie

Signature of Agent

Printed Name

3-08-04

Date

NAMES ADDRESSES OF EACH PERSON EXECUTING THIS CERTIFICATE (If necessary attach additional names and addresses)

Printed Name George M Carnie

Signature George M Carnie

Address 234 N Oak Street City Colville State WA ZIP 99114

Printed Name _____ Signature _____

Address _____ City _____ State _____ ZIP _____

Printed Name _____ Signature _____

Address _____ City _____ State _____ ZIP _____

INFORMATION AND ASSISTANCE - 360/753-7115 (TDD - 360/753-1485)

025-001 (9/00)

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CENTENNIAL STAR MANAGEMENT, LLC.
C/O GEORGE M CARNIE
1317 HUNDRED ACRE WOOD WY
KETTLE FALLS WA 99141

DETACH BEFORE POSTING

009029



STATE OF
WASHINGTON

MASTER LICENSE SERVICE
PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400

REGISTRATIONS AND LICENSES

Unified Business ID #: 602 376 951
Business ID #: 1

Expires: 03-31-2011

CENTENNIAL STAR MANAGEMENT, LLC.
1317 HUNDRED ACRE WOOD WY
KETTLE FALLS WA 99141

Domestic Limited Liability Company
Renewed by Authority of Secretary of State

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Elizabeth A. Luse
Director, Department of Licensing



95-8324 CARNE PIN 49N04W-05-0400

CARNE case