

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2016 AUG 17 AM 8: 41

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability	STATE OF IDAHO	
	LKN Properties LLC (Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)		
2.	The complete street and mailing addresses of the principal office is: 368 Ironhorse Drive, Eastport, ID 83826		
	(Street Address)		
	(Mailing Address, if different)		
3.	The name of the registered agent and the street address of the registered agent:		
	Lowell Kenneth Nail Sr.	368 Ironhorse Drive, Eastport, ID 83826	
	(Name)	(Address cannot be a post office box or postal mail box.)	
4.	The name and address of at least one governor of the limited liability company:		
	Lowell Kenneth Nail Sr.	PO Box 26, Eastport, ID 83826	
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
	(Marie)	(Audiess)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	PO Box 26, Eastport, ID 83826		
	(Address)		
Sig	nature of organizer(s).		
Ĭ		State Colo [Secretary of State use only
_	nature:	MTHICK	IDAHO SECRETARY OF STATE 08/17/2016 05:00
Pri	nted Name: Lowell Kenneth Nail	Sr.	CK:44014 CT:12757 BH:1542282

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Signature: __

Printed Name: -