

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

83651

|  | (Instructions on back  | of application)  SECRETARY OF STATE STATE OF IDAHO |
|--|--|--|
| 1.   | The name of the limited liability con  | npany is:  |
|  | Incline Property Es LLC  |  |
| 2.   | The complete street and mailing addresses of the initial designated office:              |  |
|  | 2500 W. Orchard Ave. Nampa, Id. 83651  |  |
|  | (Street Address)<br>2500 W. Orchard Ave. Nampa, Id. 83651                                | <del></del>  |
|  | (Mailing Address, if different than street address)                                      |  |
| 3. The name and complete street address of the registered agent: |  | ress of the registered agent:                      |
|  | ANTONE LVEKENISA<br>(Name)   | ZSOO W. OTCHARIS AVE. NAMPA II. (Street Address)   |
| 4.   | The name and address of at least one member or manager of the limited liability company: |  |
|  | <u>Name</u>  | Address  |
|  | Antone Luekenga  | 2500 W. Orchard Ave. Nampa, ld. 83651              |
|  | Jeff Luekenga  | 620 W. Dooley Ln. Nampa, ld. 83686                 |
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| 5.   | Mailing address for future correspondence (annual report notices):                       |  |
|  | 2500 W. Orchard Ave. Nampa, Id. 83651  |  |
| _  | The state of the continue in ASAP  |  |
| 6.   | Future effective date of filing (option  | nai): <u>/////</u>                                 |
| o:-  | nature of a manager, member of   | outhorized.  |
|  | son.   |  |
| <b>P</b> .0.   | (V/A)  | Secretary of State use only                        |
| _  | nature / //////////////////////////////////  | <del></del>  |
| Tyl  | ped Name: Antone Luekenga  |  |
| <u>_</u>   | ~///////   | IDAHO SECRETARY OF STATE 02/26/2013 05:00          |
| Sig  | nature   | CK: 5375 CT: 143576 BH: 1361891                    |

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