

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

		SECRETARY OF STATE
1.	The name of the limited liability company	is: STATE OF IDAHO
	Grove	ver LLC
2.	The complete street and mailing addresses of the initial designated/principal office:	
	2658 Peregrine, Boise, ID 83702	
	(Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Sheila Smith	2658 Peregrine, Boise, ID 83702
	(Name) (Street	nt Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	Name	Address
	Sheila Smith	2658 Peregrine, Boise, ID 83702
	Edward Udry	2658 Peregrine, Boise, ID 83702
5.	Mailing address for future correspondence (annual report notices):	
	PO 8ox 473 B	Boise, ID 83701
6.	Future effective date of filing (optional):	
_	nature of organizer(s). (An organizer is a member on the second of a member or members).	
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_	nature <u>Edicked Wilde</u>	³ / ₂ /
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Sig	nature	IDAHO SECRETARY OF STATE
_	ped Name:	CK: 1041 CT: 231794 BH: 11461
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