



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
10 AUG -9 PM 12:42

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Everlasting Hills LLC

2. The complete street and mailing addresses of the initial designated/principal office:

2600 Rome Ave Fruitland
(Street Address)

FRUITLAND ID 83619
(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Jon Lindsey
(Name)

2600 Rome Ave Fruitland ID
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name	Address
<u>Jon Lindsey</u>	<u>2600 Rome Ave Fruitland ID</u>
_____	_____
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):

2600 Rome Ave Fruitland ID 83619

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Jon Lindsey

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/09/2010 05:00
CK: 2177 CT: 250277 BH: 1234045
1 @ 100.00 = 100.00 ORGAN LLC # 2

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