



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

The Falls at Savage Lake, LLC

2. The street address of the initial registered office is:

112 N. 3RD. Street, McCall, Idaho 83638

and the name of the initial registered agent at the above address is:

Sima Muroff

3. The mailing address for future correspondence is:

P.O. Box 2988

4. Management of the limited liability company will be vested in:

Manager(s) or Member(s) (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name

Address

Sima Muroff

P.O. Box 2988, McCall, Idaho 83638

6. Signature of at least one person responsible for forming the limited liability company:

Signature: Sima Muroff

Typed Name: Sima Muroff

Capacity: Manager

Secretary of State use only

Signature _____

Typed Name: _____

Capacity: _____

FILED EFFECTIVE

07 AUG 17 AM 9:03

SECRETARY OF STATE
STATE OF IDAHO