

10/29/2008 13:15

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

08 NOV -4-AM 8: 29

(1	instructions on par	ck of application)	SCORETARY OF STATI	
1. The name of the	e limited liability c	ompany is:	SECRETARY OF STATE OF IDAHO	
·	•	SLACIER VALLEY LLC		
. The complete st	reet and mailing a	addresses of the initial	designated/principal office:	
	2	2041 STADIUM BLVD.		
(Street Address)	7345	AL PALAGE IDAMO AGO.		
Mailing Address if dif	I VVI (remit than street address)	N FALLS, IDAHO 83301		
	•	dress of the registered	agent:	
CAMERO	CAMERON D. OLER		2041 STDAIUM BLVD., TWIN FALLS, ID 83301	
(Name)		(Street Address)		
JOSEP		<del></del>		
	<u>Name</u> Cameron D. Oler		<u>Address</u> 2041 STADIUM BLVD. TWIN FALLS, ID. 83301	
	HM. OLER	505 SUGAR AVENUE, SHELLEY, ID. 83274		
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	the second secon			
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. Mailing address		ondence (annual repor		
	2041 STADIU	M BLVD., TWIN FALLS, I	D. 83301	
5. Future effective (	date of filing (optic	onal):		
e e e			and the second s	
ignature of organize	er(s). (An organizer is	s a member, or is		
cting in behalf of a men	nber or members).	<del></del>	Socretary of State use only	
-	<i> </i>	ş	Secretary of diate use only	
Signature	wollder	LER E		
yped Name:	CAMERON D. OL	LER 5		
Application of the second seco	ki i kiki i v time			
Signature				
Ignature/7/92	106	38	IDAHO SECRETARY OF	