

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 SEP 30 PM 12: 12

	(Instructions on back	of application)	STATE OF IDAHO
1.	The name of the limited liability con	npany is:	
	•	dy Meeker Building LLC	• • • • • • • • • • • • • • • • • • •
2.	The complete street and mailing add 2850 S. Sugar Loaf Eagle ID 83616 (Street Address)	dresses of the initial d	esignated/principal office:
	(Mailing Address, if different than street address)	****	
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3.	The name and complete street address of the registered agent:		
	Kevin Kennedy	2850 S. Sugar Loaf Eag	ile ID 83616
	(Name)	(Street Address)	<del></del>
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Kevin Kennedy	2850 S. Sugar Loaf Eag	le ID 83616
5.	Mailing address for future correspon 2850 S. Sugar Loaf Eagle ID 83616	dence (annual report	notices):
6.	Future effective date of filing (optional):		
Sig per:	nature of a manager, member or son.	authorized	
	11 16		Secretary of State use only
Sigi	nature <u>/                                   </u>		
тур	ed Name: <u>resin</u> Kennedy		
Sig	nature		IDAHO SECRETARY OF STATE
Тур	ed Name:		09/30/2010 05:00 CK: 3157 CT: 201452 BH: 1241192 1 0 100.00 = 100.00 CRGAN LLC # 8

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