



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 JAN 13 AM 9:23

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

TM VALDEZ LLC

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

800 FALLS AVENUE SUITE #1, TWIN FALLS, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

WILLIS STONE

(Name)

800 Falls Avenue Suite #1, Twin Falls, ID 83301

(Street Address)

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

Name

Address

TIM VALDEZ

11920 W. Patrick Lane, Sun City, AZ 85373

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

11920 W. Patrick Lane, Sun City, AZ 85373

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Tim Valdez

Secretary of State use only

Signature

Typed Name:

IDAHO SECRETARY OF STATE  
01/13/2014 05:00  
CK: 577 CT: 291621 BH: 1405575  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

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