FILED EFFECTIVE

CERTIFICATE OF ORGANIZATION	
LIMITED LIABILITY COMPANY	
(Instructions on back of application)	
1. The name of the limited liability company is:	
Property Management Investment Group LLC	
2. The complete street and mailing addresses of the initial designated office:	
614 E Seltice Way ste D Post Falls, ID 83854	
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address of the registered agent:	
Tyson Jewsbury	503 E Sunrise Dr Coeur d Alene, ID 83815
(Name)	(Street Address)
The name and address of at least one member or manager of the limited liability company:	
Name	Address
Darlene Berry	5206 N Darin Rd Otis Orchards, WA 99207
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	t and the second se
4	
5. Mailing address for future correspond	dence (annual report notices):
614 E Seltice Way ste D Post Falls, ID 83854	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized	
person.	Secretary of State use only
Signature 6 2 2	
Typed Name: Darlene Berry	IDAHO SECRETARY OF STATE
	02/23/2012 05:00 CK: 5018 CT: 259852 BH: 1311921
Signature	1 @ 100.00 = 100.00 ORGAN LLC # 2
Typed Name: Type Jewsbury	
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