

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 7012 JUH 25 AM 9: 26

ETO	(instructions on	n back of application)	OFFICE OV OF STATE
1 The nam	ne of the limited liabili	ty company is:	SECULIARY OF STATE STATE OF IDAHO
i. The han	ic or the limited habin	• •	Office of Ib. 110
	·	LP Properties,LLC.	
	he complete street and mailing addresses of the initial designated office:		
	Harrison Ave, Pocatello ID	83204	
(Street Ad	dress)		
(Mailing A	ddress, if different than street add	dress)	
3. The nan	ne and complete stree	et address of the registered	agent:
Lois Par	ker	374 N Bonneville Rd, Inkom ID 83245	
(Name)		(Street Address)	
4. The nan	ne and address of at le	east one member or manag	ger of the limited liability
compan	y:		
	<u>Name</u>		Address
Pat Park	(er	374 N Bonneville Rd, Inkom ID 83245	
,			
	 -		
•			
5 Mailing	addraga far flitura sarr	roonandanaa (annual ronad	t national:
-		espondence (annual report	nouces).
1432 N	Harrison Ave, Pocatello ID	83204	
O E.4	ee at a late eest of		
6. Future e	effective date of filing (optional):	·
	of a manager, memb	er or authorized	
person.	101		Secretary of State use only
Cianatura	Ti fallo		occident of diale doe only
Signature _	Jose Parker	<u></u>	
ryped Name	e: Lofs Parker		
	124/10		
Signature	184 Larken		10aho secretary of state 06/25/2012 05:0
Typed Name	e: Pat Parker		CK: 91 CT: 271760 BH: 132965

CX: 91 CT: 271760 BH: 1329654 1 9 188.98 = 188.90 DRSAN LLC # 2