

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

	LIMITED LIABI	LIIY COMPANY	ZU14 JUL -3 AM 8: 51
301	(Instructions on b	ack of application)	SECRETARY OF STATE
1. The name	e of the limited liability	company is:	STATE OF IDAMO
WAR Pro	perty Management, LLC	•	We have the state of the state
	plete street and mailing onado Street	addresses of the initial	designated office:
	ress) lls, ID 83404 dress, if different than street addres	ss)	
3. The name	e and complete street a	ddress of the registered	agent:
Ron Po	orter	3785 Barossa Di	rive, Idaho Falls,ID 83404
(Name)		(Street Address)	
			
_	ddress for future corres oronado Street, Ida	pondence (annual repor ho Falls, ID 83404	t notices):
. Future ef	fective date of filing (op	tional):	
		,	
ignature of erson.	a manager, member	or authorized	
			Secretary of State use only
ignature	Ron Porter		IDANO SECRETARY OF STAT
yped Name:			07/03/2014 05:00 CK:373 CT:110617 BH:143
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Typed Name: