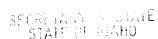
FILED EFFECTIVE

25

CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY
(Instructions on back of application)

Typed Name: ____



LIMITED LIABILI	TY COMPANY STATE OF PIANU
(Instructions on back	c of application)
1. The name of the limited liability cor	mpany is:
Endles	ss Summer Gardens LLC
 The complete street and mailing ad 785 E. Lacey Ave., Hayden, Idaho 83835 (Street Address) 	Idresses of the initial designated/principal office:
(Mailing Address, if different than street address)	
. The name and complete street add	ress of the registered agent:
United States Corporation Agents, Inc. (Name)	3006 E. Goldstone Drive, Suite 218, Meridian, ID 83642 (Street Address)
company:	one member or manager of the limited liability
Name Lacy LeeAnn Curtis	Address 785 E. Lacey Ave., Hayden, Idaho 83835
. Mailing address for future correspon	ndence (annual report notices):
785 E. Lacey Ave., Hayden, Idaho 83835	i A
S. Future effective date of filing (option	nai):
ignature of a manager, member or	authorized
erson.	Secretary of State use only
yped Name: Karla Figueroa, Legalzoom.cc	om, Iric.
Signature	

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IDANO SECRETARY OF STATE

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CK: 953224 CT: 172899 BH: 1318362
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