

Typed Name: KATHRYN'S GATES

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

12 JAN 18 AM 9: 14

(Instructions on back of application)

The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
	GATES TRC LLC	011112
The complete street and mailing a 16376 N FRANKLIN BLVD #H-10, NAM		designated office:
(Street Address) P.O. BOX 1153 NAMPA, IDAHO 8365	3	
(Mailing Address, if different than street address)	
3. The name and complete street ad	dress of the registere	d agent:
M. DAVID GATES III		BLVD #H10 NAMPA IDAHO 83687
(Name)	(Street Address)	
The name and address of at least company:	one member or mana	ager of the limited liability
Name		Address
M. DAVID GATES III	PO BOX 1153 NAMPA IDAHO 83653	
KATHRYN S GATES PO BOX 1153		A IDAHO 83653
- Commence of the Commence of	<u></u>	
5. Mailing address for future corresp	ondence (annual reno	art notices):
PO BOX 1153 NAMPA IDAHO 83653	,	it notocs).
FO BOX 1133 NAMIFA IDATIO 03033		
6. Future effective date of filing (opti	onal):	v
(op.		
Signature of a manager, member	or authorized	
person.		Secretary of State use only
Signature MASAS		
Typed Name: M. DAVID GATES III		
7		IDAHO SECRETARY OF STATE 01/18/2012 05:00

cert_org_lic Rev. 07/2010

CK: 813 CT: 266048 BH: 1306689 1 0 100.08 = 100.00 ORGAN LLC # 2

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