



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 JAN 31 AM 11:54

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CHOICE PROPERTY LLC

2. The complete street and mailing addresses of the initial designated office:

6925 McElroy Rd. Melba, ID. 83641

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Robert Johnson

(Name)

6925 McElroy Rd. Melba, ID. 83641

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Robert Johnson

6925 McElroy Rd. Melba, ID. 83641

5. Mailing address for future correspondence (annual report notices):

6925 McElroy Rd. Melba, ID. 83641

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Robert Johnson

Signature _____

Typed Name: _____

Secretary of State use only

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01/31/2014 05:00
CK: 1688504 CT: 172099 DH: 1488545
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