



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 FEB 27 AM 8:32

1. The name of the limited liability company is:

2500 Washington, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

722 N College Road, Twin Falls, ID 83301

(Street Address)

PO Box 5399, Twin Falls, ID 83303

(Mailing Address, if different than street address)

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

Pete Jones

(Name)

722 N College Rd, Twin Falls, ID 83301

(Street Address)

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

Name

Address

Pete Jones

PO Box 5399, Twin Falls, ID 83303-5399

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

PO Box 5399, Twin Falls, ID 83303-5399

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Pete Jones

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/27/2015 05:00

CK:1630 CT:307007 BH:1463790

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