



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 AUG -4 AM 9:20

FILED EFFECTIVE
SECRETARY OF STATE
STATE OF IDAHO1. The name of the limited liability company is:

BEHRENS FAMILY I, LLC

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

236 STEWARTS DRIVE, SAGLE, ID 83860

(Street Address)

883 GRAND VISTA WAY, GRAND JUNCTION, CO 81506

(Mailing Address, if different than street address)

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

ROB BEHRENS

(Name)

236 STEWARTS DRIVE, SAGLE, ID 83860

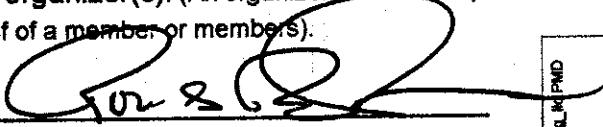
(Street Address)

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

Name	Address
ROB BEHRENS	236 STEWARTS DRIVE, SAGLE, ID 83860

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

883 GRAND VISTA WAY, GRAND JUNCTION, CO 81506

6. Future effective date of filing (optional): _____Signature of organizer(s). (An organizer is a member, or is
acting in behalf of a member or members.)Signature 
Typed Name: ROB BEHRENS

Secretary of State use only

 Form LLC-1000
Rev. 07/2008
6 copies/LLC form/Robert L. Ogle, PMD
Signature _____
Typed Name: _____
 IDAHO SECRETARY OF STATE
 08/04/2008 05:00
 CK: 20109 CT: 14262 BH: 1130189
 1 # 100.00 = 100.00 ORGAN LLC # 2
 1 # 20.00 = 20.00 EXPEDITE C # 3

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