

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 HAR 30 AM 9: 11

(Instructions on back of application)

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1. The name of the limited liability	y company is:
VIKING ARMS APARTMENTS LLC	;
3528 10th Street, Lewiston, ID 8350 (Street Address)	ng addresses of the initial designated office:
PO Box 32, Lewiston, ID 83501 (Mailing Address, if different than street add	(reep)
3. The name and complete street	
Lori R. Carlton	3528 10th Street, Lewiston, ID 83501
(Name)	(Street Address)
The name and address of at le company:	east one member or manager of the limited liability
Name	Address
Lori R. Carlton	3528 10th Street, Lewiston, ID 83501
5. Mailing address for future corre	espondence (annual report notices):
6. Future effective date of filing (o	optional):
Signature of a manager, member person.	
A P	Secretary of State use only  IDAHO SECRETARY OF STATE
Signature / / / / / / / / / / / / / / / / / / /	03/38/2015 05:00 CK:107 CT:279980 BH:1468472
Signature	16 100.00 = 100.00 ORGAN LLC #
Typed Name:	11.111
Typou Rullio.	

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