

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 09 DEC 14 AM 8: 49

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

W88950

1. The name of the limited liability compan	y is: STATE OF IDAHO
A & S Proper	ty Management, LLC
2. The complete street and mailing address	ses of the initial designated/principal office:
1603 Sun Valley V	Way, Pocatello, ID 83201
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address	of the registered agent:
David Sleight	1603 Sun Valley Way, Pocatello, ID 83201
(Name) (St	reet Address)
The name and address of at least one more company:	nember or manager of the limited liability
Name	Address
Gayla Sleight	1603 Sun Valley Way, Pocatello, ID 83201
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5. Mailing address for future correspondence	ce (annual report notices):
	Way, Pocatello, ID 83201
-	
6. Future effective date of filing (optional):	- Company of the second
Signature of organizer(s). (An organizer is a mem	nber, or is
acting in behalf of a member or members).	Secretary of State use only
Signature Barul & Slight	OW.
Typed Name: DAVID SLEIGHT	
	E TANK CERBETADY RE STATE
Signature Sayla K. Sleight	The state The
Typed Name: GAYLA SLEIGHT	1 2 190.00 = 100.00 ORGAN LLC