

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 SEP -3 PM 12: 14

 The name of the limited liability compar 		TF
	Rent, LLC STATE OF TUAHO	
2. The complete street and mailing addres	sses of the initial designated/principal office	e. —
16070 Idaho Cen	nter Blvd Nampa Id 83687	-,
(Street Address)	s Pl. Meridian id 83646	
(Mailing Address, if different than street address)	s Fi. Mendian id 83646	· .
3. The name and complete street address	of the registered agent:	
Choice Corp, Inc	3556 N. Lefors Pl. Meridian Id 83646	
(St	treet Address)	
. The name and address of at least one more company:	nember or manager of the limited liability	#1* ·
<u>Name</u>	Address	
Choice Corp, Inc	3556 N. Lefors Pl. Meridian Id 83646	
		
		,
Mailing address for future correspondence	ce (annual report notices)	.5
3556 N Lefors P1. Meridian, ID 83	3646	
Future effective date of filing (optional):		
,		
nature of organizer(s). (An organizer is a memb	her orie	,*
ing in behalf of a member or members).	501, 01 13	
12/5/	Secretary of State use only	· · · · · · · · · · · · · · · · · · ·
gnature / WV		
ped Name: Michael Edgar	bo	8
	maske 900	
gnature	IDAHO SECRETARY OF S	
ped Name:	TDAHO SECRETARY OF S OCIO DE CONTROL DE CON	13 = 100 H: 1185

W8667/