

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 DEC - 1 PH 12: 06

SEPREMARY OF STATE

1. T	he name of the limited liability co	ompany is:	STA	TE OF IDAHO
•	•	eal Family Invest	tment, LLC	
2. T	he complete street and mailing a	ddresses of t	he initial designated/j	principal office:
_	5215 North Watersedge Avenue, Boise, Idaho 83714			
((Street Address)			
ī	(Mailing Address, if different than street address)			
3. T	he name and complete street add	dress of the r	egistered agent:	11/2
	Zona S. O'Neal	5215 I	North Watersedge Ave., B	loise, ID 83714
7	(Name)	(Street Addre	88)	
	he name and address of at least ompany:	one member	or manager of the lin	nited liability
	Name Address			
-	Zona S. O'Neal	Zona S. O'Neal 5215 North Watersedge Ave., Boise, ID 83714		
_	(also known as Mary Z. O'Neal)			
_	David T. O'Neal III 5735 North Willow Creek Rd., Eagle, ID 83616			agle, ID 83616
_	Kelle Z. O'Neal	93 Seney Dr., Bernardsville, NJ 07924		
	· · · · · · · · · · · · · · · · · · ·			
5. M	lailing address for future correspondent	-	•	
-	52 IS NOTH	valerseage Ave	., Boise, ID 83714	
6. F	uture effective date of filing (optic	onal):	·	
-	iture of organizer(s). (An organizer is in behalf of a member or members).	s a member, or is	3	
zcurg i	in behalf of a members).	•	Secretary o	of State use only
Signa	ture from A O'Kin		Ometing for the property of the Party of the	
Гурес	i Name: 🖊 Zona S. O'Neal, Co-Ma	anager	te of	-
			9000	AHO SECRETARY OF STATE
3igna	ture	T-1115-2	12/ 12/	01/2009 05:00
Typer	t Name:		E 1 106	31