

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 SEP 24 AM 8: 29

	(Instructions o	on back of application)	•	
1.	The name of the limited liability company is:		S	STATE OF IDA
	HARDTIMES LENDING, LLC			
2.	The complete street and mailing addresses of the initial designated office: 240 W. 350 N., BLACKFOOT, ID 83221			
	(Street Address)			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	NYLE TANNER	240 W. 350 N., 8	BLACKFOOT, ID 83221	
	(Name)	(Sireel Address)		
4.	The name and address of at company:	least one member or n	nanager of the limited liabil	ity
	<u>Name</u> NYLE I. TANNER	240 W 250 N 6	Address BLACKFOOT, ID 83221	l l
				
	CHERYL M. TANNER	240 W. 350 N., E	BLACKFOOT, ID 83221	
5.	Mailing address for future co	•	report notices);	
	240 W. 350 N., BLACKFOOT, ID	183221	_ 	
6.	Future effective date of filing	(optional):		ļļ.
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Sig	nature of a manager, mem	ber or authorized		ļļ.
per	son.		Secretary of State use or	w
Sia	nature // Julia / 7	enner		•
_	ed Name: Nyle I. Tanner		IDAHO SECRETARY	OF STATE
•	ΛΛ.		09/24/2014	05:00
_	nature Werel M	Janner	CK:2239558 CT:1720	· · · · · · · · · · · · · · · · · · ·
Тур	ed Name: Cheryl Mutanner		wita	<u> </u>
			00148	

9/21/2012

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