



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 JUN 15 AM 9:40

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

FILED EFFECTIVE

1. The name of the limited liability company is:

Gables of Pocatello, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

1396 Satterfield Dr., Pocatello, ID 83201

(Street Address)

PO Box 656, Pocatello, ID 83204

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Keith Rasmussen

(Name)

1396 Satterfield Dr., Pocatello, ID 83201

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name****Address**

Keith Rasmussen

1396 Satterfield Dr., Pocatello, ID 83201

5. Mailing address for future correspondence (annual report notices):

PO Box 656, Pocatello, ID 83204

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Keith Rasmussen

Secretary of State use only

Signature

Typed Name:

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