

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 OCT -6 AM 9: 57

SECRETARY OF STATE

. The name of the limited liability compa	any is:
	and Avenue, LLC
. The complete street and mailing addre	esses of the initial designated/principal office:
	Pointe Dr., Eagle, ID 83616
(Street Address) P.O. Box	951, Eagle, ID 83616
(Mailing Address, if different than street address)	
. The name and complete street addres	ss of the registered agent:
Jonathan Steele	1141 E. Crowne Pointe Dr., Eagle, ID 83616
(Name)	(Street Address)
company: Mame	Address Address Address Address
The Real Estate Company, Inc.	1141 E. Crowne Pointe Dr., Eagle, ID 83616
5. Mailing address for future correspond	
P.O. 863	x 951, Eagle, ID 83616
6. Future effective date of filing (optiona	n):
Signature of organizer(s). (An organizer is a nacting in behalf of a member or members).	nember, or is
stary at Design of a file label of the label of	Secretary of State use only
Signature with the	IDAHO SECRETARY OF STATE 10/06/2008 05:0 CK: 120 CT: 229465 BH: 11396 1 0 100.00 = 100.00 ORGAN LLC
Typed Name: Samuel Steele	IDAHO SECONTANA
	10/06/2008 OF STATE CK: 120 CT: 220/05 05 2 0
Signature	CK: 120 CT: 229465 BH: 11396 1 0 100.00 = 100.00 CT: 229465 BH: 11396 CT: 22946 BH: 11396 CT: 22946 BH: 11396 CT: 229465 BH: 11396 CT: 22946 BH: 11396 BH
Toward Massac	· · · · · · · · · · · · · · · · · · ·