

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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(Illistructions on b	ack of application,	4 HI 0:31 A	
. The name of the limited liability	company is:	SECRETARY OF STATE	
	Emerald Street 717, LLC	STATE OF IDAHO	
The complete street and mailing	addresses of the initial design	nated/principal office:	
·	g Leaf Lane, Twin Falls, Idaho 8330		
(Street Address)			
(Mailing Address, if different than street addre	30x 6004, Twin Falls, Idaho 83303-6	0004	
The name and complete street a		nt:	
Gary N. Nelson	5422 North 400 East, H	Hagerman, Idaho 83332	
(Name)	(Street Address)		
·.			
The name and address of at lea company:	st one member or manager o	of the limited liability	
Name Address		iress	
Nelson Homes North, LLC	445 Falling Leaf Lane,	Twin Falls, Idaho 83301	
ila Nelson	717 Emerald, Ru	717 Emerald, Rupert, Idaho 83350	
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. Mailing address for future corres	•		
Post Office E	3ox 6004, Twin Falls, Idaho 83303-	5004	
. Future effective date of filing (op	otional):		
gnature of organizer(s). (An organize			
ting in behalf of a methber or members).		Secretary of State use only	
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gnature / Gary N. Neis	Jees of the second		
pod Hame.	 §		
Member of Nelson H	1.2%	IDANO SECRETARY OF STATE	
gnature	Pitoms/LC	CK: 3936 CT: 296593 BH: 1185	
/ped Name:	Revis	1 0 100.00 = 100.00 ORGAN LL	

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