

## CERTIFICATE OF ORGANIZATIONLED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 AUG -1 AM 9: 19

1.	The name of the limited liability con	nnany io:	SECRETARY CESTATE
٠.	Latch County Property Management 11.6		SECRETARY - STATE STATE OF IDAHO
_			
2.	The complete street and mailing addresses of the initial designated office:		
	1608 Hillcrest Drive, Moscow, ID 83843 (Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Jennifer O'Brien 1608 Hillcrest Drive, Moscow, ID 83843		st Drive. Moscow. ID 83843
	(Name)	(Street Addres	
4.	The name and address of at least one mocompany:  Name		or manager of the limited liability  Address
	Jennifer O'Brien	1608 Hillcrest Drive, Moscow, ID 83483	
		-	
5.	Mailing address for future correspondence (annual report notices):		
	1608 Hillcrest Drive, Moscow, ID 83843		
6.	Future effective date of filing (option	al):	
	nature of a manager, member or son.	authorized	
<u>.</u>			Secretary of State use only
	nature Manifest The		
Тур	ed Name Springer	700	
_	)		IDAHO SECRETARY OF STATE 08/01/2013 05:00
_	nature		CK: 4492 CT: 139968 BH: 1384472 1 @ 190.00 = 100.00 ORGAN LLC # 2
Tyn	ed Name <sup>.</sup>		7 E 150'00 - 100'00 AVONU FFF # C

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Typed Name: