## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAY 23 PM 2: 12

SEGRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability com	npany is:	5	IAIE UF IDAHU
		MNJ, LLC		
2.	The complete street and mailing addresses of the initial designated/principal office: 1065 E. Winding Creek Dr. #200 Eagle, ID 83616  (Street Address)			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	Jerry Darnall (Name)	1065 E. Wind	ling Creek Dr. #200	Eagle, ID 83616
4.	The name and address of at least one member or manager of the limited liability company:			
	Name	<u>Address</u>		
	MJT Irrevocable Trust	1065 E. Winding Creek Dr. #200 Eagle, ID 83616		
5.	Mailing address for future correspondence (annual report notices):  1065 E. Winding Creek Dr. #200 Eagle, ID 83616			
6.	i. Future effective date of filing (optional):			
	nature of a manager, member or son.	authorized		
Sia	nature Management	<b>~</b>	Secreta	ry of State use only
-	ped Name: Jerry Darnall	<del></del>		WA RESIDENCE TO ASSESS
. 16		<del></del>	95/i	HO SECRETARY OF STATE 24/2011 05:00
Sig	nature		1 8 188.6	CT: 220367 BH: 1275017 NG = 100.00 ORGAN LLC # 2
Тур	ped Name:			

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