

	/!	a alo ad assult	COMPAND TO P	III 2. 99	
	(เกรเนนตของ ถ้า	ack of application)	· SEURLIARY U		
1. The nar	me of the limited liability	company is:	STATE OF I	UAHU	
		Lyons House LLC			
2. The cor	mplete street and mailing	addresses of the I	nitial designated	/principal office:	٠.
	•	kewood Avenue, Sagle	_		
(Street Ac	idress)		*	1 2	
(Mailing A	Address, if different than street address	· .			- ·
3. The nar	me and complete street a	ddress of the regis	tered agent:		•
	Anne L. Haynes	:: 180 l ali	kewood Avenue, Sa	ide ID 83860	•
(Name)	Anne E. Hayries	(Street Address)	terrood Ayeriad, Qu	gic ip occo	
,			•		
4. The nar	ne and address of at leas	it one member or r	nanager of the l	imited liability	•
	Name		Address	•	
·	Anne L. Haynes	180 Lakewood Avenue, Sagle ID 83860			
			,		
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				:	
		, <u>, , , , , , , , , , , , , , , , , , </u>			
				1	
5. Mailing	address for future corres	oondence (annual	report notices):		
	•	rewood Avenue, Sagle	•		
			•		
6. Future e	effective date of filing (opi	tional):		•	
	4				_
Signature of	organizer(s). (An organizer	is a member, or is			
	If of a member or members).				
	//	<u>.</u>	Secretary	of State use only	
Signature_ __ (Left XXXXX	Zignes 3		•	
Typed Name	e: Anne L. Hayne				
	_	MLC Security			
Signature	*		<u>,</u>	essua apacmesali Al	- 5467
Dunad Name	 *	! 9 7	i	TROUD SECRETORY OF	- SIAII

O8/18/2008 O5:00 CK: 143404 CT: 172099 BH: 1131957 1 0 100.80 = 100.80 ORGAN LLC # 2 1 0 20.00 = 26.00 EXPEDITE C # 3