



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 FEB 27 PM 1:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Blue Sky Loan Modification, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

4355 Emerald St. STE 190, Boise, Idaho 83706

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Kristin lee Hall

4355 Emerald St. STE 190, Boise, Idaho 83706

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Kristin lee Hall

4355 Emerald St. STE 190, Boise, Idaho 83706

Kevin M. Hall

4355 Emerald St. STE 190, Boise, Idaho 83706

5. Mailing address for future correspondence (annual report notices):

4355 Emerald St. STE 190, Boise, Idaho 83706

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature *Kristin lee Hall*

Typed Name: Kristin lee Hall

Signature *Kevin M. Hall*

Typed Name: Kevin M. Hall

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
02/27/2009 05:00
CK: 354 CT: 203162 BN: 1150991
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