



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

AUG 12 AM 8:30

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Stonegate Properties, LLC

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

60 East Simpson Ave., Box 2869, Jackson, WY 83001

(Street Address)

(Mailing Address, if different than street address)

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

940 Edgewood Lane, P.O. Box 828Kathleen Spitzer

(Name)

Victor, ID 83455

(Street Address)

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

NameAddressIntegrity Investments, LLC 60 East Simpson Ave., Jackson, WY 83001

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

60 East Simpson Ave., Box 2869, Jackson, WY 83001

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Lisa Shults, Organizer

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/12/2011 05:00
CK: 17942 CT: 197947 BH: 1286228
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