

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

11 JUN 29 AM 11:56

W.	(Instructions on back of applicat	on) SCORETARY OF STATE
1.	The name of the limited liability company is:	STATE OF IDAHO
	Killdrummy II L	LC
2.	The complete street and mailing addresses of the initial designated/principal office: 9417 N. Winterwood low Boise IDAW 837/	
	9417 N. Winterwood	I have Beise IDANO 03714
	(Street Address)	/
	(Mailing Address, if different than street address)	
3.	3. The name and complete street address of the registered agent:	
	Scott in Hoyes 94 (Name) (Street Address)	7 N. Winterwoodlank
	(Name) (Street Addre	BONE I DAHE 37/4
4.	4. The name and address of at least one member or manager of the limited liability company:	
	Name	Address
	Sott m Hayes 941	1 N. Winterwoodlac
		Raise 83714
_	M. W M	ln aut matina).
5.	Mailing address for future correspondence (and	nual report notices):
		()
6.	Future effective date of filing (optional):	
Sig	nature of a manager, member or authorize	d
_	son.	Secretary of State use only
Sim	nature Scall M. Hayer	Secretary or State use only
	nature / / / / / / / / / / / / / / / / / / /	
ı y þ	ou ruine.	IDAHO SECRETARY OF STATE
Sig	nature	06/29/2011 05:00 CK: CASH CT: 260239 RH: 1280588
	and Name:	I M TAN AN = TAN AN AKRAN FIC # 5

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