

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2012 AUG 16 AM 9: 13

		- 10
The name of the limited liability co	ompany is:	SECRETARY OF STATE
HIDDE	EN LEAF 335 E 23RD LLC	STATE OF IDAHO
The complete street and mailing ac 2518 ALMO AVE BURLEY, IDAHO 833 (Street Address)		esignated office:
(Mailing Address, if different than street address)		
The name and complete street add	dress of the registered a	agent:
BRENT C. SKAGGS	2518 ALMO AVE BURLI	EY, IDAHO 83318
(Name)	(Street Address)	
The name and address of at least company:	one member or manage	·
Name BRENT C. SKAGGS	2518 ALMO AVE BURL	Address
HIEDI W. SKAGGS	2518 ALMO AVE BURL	EY, IDAHO 83318
Mailing address for future correspond	ondence (annual report	notices):
2518 ALMO AVE BURLEY, IDAHO 833	18	
	N.	
Future effective date of filing (option	nai):	
inature of a manager mamber o	r outhorized	
gnature of a manager, member or rson.	ı autiorized	
m		Secretary of State use only
nature///		
ped Name: BRENTC. SKAGGS		
1.1/10d		:
nature Walls		TRANS SEPSETABLE OF STATE
ped Name: HIEDI W. SKAGGS		IDAHO SECRETARY OF STATI

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08/16/2012 05:06 CK: 1513 CT: 246138 BH: 1336184 1 2 190.88 = 180.80 ORGAN LLC # 2 1 2 28.80 = 28.80 EXPEDITE C # 3

W1/6468