



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 DEC -9 AM 8:23  
SECRETARY OF STATE  
STATE OF IDAHO

FILED EFFECTIVE

1. The name of the limited liability company is:

Apple Hills, LLC

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

4013 North Elk Valley Way, Featherville, Idaho, 83647

(Street Address)

(Mailing Address, if different than street address)

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

Michael Freer

(Name)

4013 North Elk Valley Way, Featherville, ID 83647

(Street Address)

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

**Name**

**Address**

Michael Freer

4013 North Elk Valley Way, Featherville, ID 83647

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

4013 North Elk Valley Way, Featherville, Idaho, 83647

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

Typed Name: Michael Freer

Signature

Typed Name:

Secretary of State use only

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Revised 07/2008

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12/09/2008 03:00  
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