251

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2017 DEC - | AM 8: 49

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

VETO V	riiing ree, \$100 typea, \$120 not typea	70 to 20 .	
	Complete and submit the application in duplicate.	SECRETARY OF STATE OF IDA	
The nam	ne of the limited liability company is:	- THE STITUS	

The name of the limited lia	abilita a a sa s	100		
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GREEN MEADOWS PHA				
(xemember to include ti	ie words "Limited Liability Company,"	" "Limited Company," or the abbreviations L.L.C., LLC, or LC)		
The complete street and r	nailing addresses of the pri	incipal office is:		
6426 E. Maplewood Aver	iue, Post Falls, ID 83854			
(Street Address)				
(Mailing Address, if different)				
The name of the registere	d agent and street address	s of the registered agent:		
Howard L. Rude	6426 E. Maplewood Avenue, Post Falls, ID 83854			
(Name)	(Address cannot be a	(Address cannot be a post office box or postal mail box)		
	The name and address of at least one governor of the limited liability company:			
Howard L. Rude	<u>.</u>	6426 E. Maplewood Avenue, Post Falls, ID 83854		
(Name)	Name) (Address)			
Delvona R. Rude	6426 E. Maple	6426 E. Maplewood Avenue, Post Falls, ID 83854		
(Name)	(Address)			
(Name)	(Address)			
,	(71001603)			
(Name)				
(Manie)	(Address)			
Mailing address for future	correspondence (appua) re	enort notices):		
-	Mailing address for future correspondence (annual report notices): 6426 E. Maplewood Avenue, Post Falls, ID 83854			
(Address)	100,1 001, 010, 10 00001			
gnature of organizer(s).				
gnature: Lexicond	2 Reede	Secretary of State use only		
griature, John Strate	- X reene			
inted Name: Howard L. Rude)	IDAHO SECRETARY OF STATE		
^ A	Λ Λ	12/01/2017 05:00		
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D-b D-D-		N119210910		
rinted Name: Delvona R. Rud	e			

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Rev. 11/2015