



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

10 OCT 12 AM 8:37

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

the Haunts of Hidden Hollow LLC

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

E 700 N 2900E St Anthony ID 83445
(Street Address)

1929 Hightop Ln Rexburg ID 83440
(Mailing Address, if different than street address)

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

Matt Grover
(Name)

1929 Hightop Lane, Rexburg ID 83440
(Street Address)

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

Name	Address
<u>Diana Grover</u>	<u>1929 Hightop Ln Rexburg ID 83440</u>
<u>Nyle Gam</u>	<u>E 700N 2900E St Anthony ID 83445</u>

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

1929 Hightop Ln Rexburg ID 83440

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

Signature of a manager, member or authorized person.

Signature Matt Grover
Typed Name: Matt Grover

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/12/2010 05:00
CK: 17307167646 CT: 251900 BH: 1242468
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 97004