



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAY 22 AM 10:05

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

RIVERSIDE ^{Co} at the Narrows LLC

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

46 S 2ND EAST PRESTON, ID 83263

(Street Address)

(Mailing Address, if different than street address)

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

CARLY DUKE

(Name)

46 S 2ND EAST PRESTON, ID 83263

(Street Address)

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

Name

Address

CARLY DUKE

46 S 2ND EAST PRESTON, ID 83263

WILLIAM AUSTIN PHILLIPS

46 S 2ND EAST PRESTON, ID 83263

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

46 S 2ND EAST PRESTON, ID 83263

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

Signature of a manager, member or authorized person.

Signature Carly Duke

Typed Name: CARLY DUKE

Signature William Austin Phillips

Typed Name: WILLIAM AUSTIN PHILLIPS

Secretary of State use only

IDAHO SECRETARY OF STATE

05/22/2014 05:00

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