

Signature:

Printed Name:

Signature: A

Deborah McPherson

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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

Complete and submit the application in duplicate.

1. The name of the limited liability company is: Lakeshore Property Management, LLC



Street Address) P.O. Box 288, Sagle, ID 83860	
Mailing Address, if different)	
The name and complete street a	address of the registered agent:
Deborah McPherson	2751 Lakeshore Drive, Sagle, ID 83860
Name)	(Address)
,	(Address)
Name)	(Address)
Deborah McPherson	2751 Lakeshore Drive, Sagle, ID 83860
Name)	(Address)
Name)	(Address)
Name)	(Address)
Mailing address for future corres P.O. Box 288, Sagle, ID 83860	spondence (annual report notices):
(Address)	

1DAHO SECRETARY OF STATE 09/08/2015 05:00

CK:1675 CT:314365 BH:1491478 16 100.00 = 100.00 ORGAN LLC #2

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