

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 24 AM 9: 40

(Instructions on back of application)
SECRETARY OF STATE

1. The name of the limited liability	company is: STATE OF IDAHO
	Grandwood LLC
2. The complete street and mailing	g addresses of the initial designated/principal office:
	neffield Circle, Idaho Falls ID 83404
(Street Address)	
(Mailing Address, if different than street address	ess)
3. The name and complete street	address of the registered agent:
Dan Harwood	350 Sheffield Circle, Idaho Falls ID 83404
(Name)	(Street Address)
The name and address of at leacompany:	ast one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
Dan Harwood	350 Sheffield Circle, Idaho Falls ID 83404
	spondence (annual report notices):
350 Sh	neffield Circle, Idaho Falls ID 83404
Future effective date of filing (or	ptional):
Signature of organizer(s). (An organizer	· ·
cting in behalf of a member or members)	Secretary of State use only
Signature Ka Var	DOO O
yped Name: Dan Harwo	od Ş
	OUB See
Signature	IDAHO SECRETARY OF STATE
Typed Name:	11/24/2008 23150 CK: 500 CT: 231714 BH: 114581

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