



# 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.

**FILED EFFECTIVE**

2016 APR 21 AM 8:54

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

**St. Maries Property Management LLC.**

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

**834 Main Ave., Saint Maries, ID 83861**

(Street Address)

(Mailing Address, if different)

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

**Joseph West**

**834 Main Ave., Saint Maries, ID 83861**

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

**Joseph West**

**834 Main Ave., Saint Maries, ID 83861**

(Name)

(Address)

**Kristina West**

**834 Main Ave., Saint Maries, ID 83861**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

**834 Main Ave., Saint Maries, ID 83861**

(Address)

Signature of organizer(s).

Signature: Joseph West

Printed Name: Joseph West

Signature: Kristina West

Printed Name: Kristina West

Secretary of State use only

IDAHO SECRETARY OF STATE

04/21/2016 05:00

CK:145 CT:323448 BH:1524659

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