

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

08 JUL 29 PM 4: 39

(Instructions on back of application)

SECRETARY OF STATE

	Eldorado Group, LLC
	g addresses of the initial designated/principal office Street, Suite 425, Boise, Idaho 83702
(Street Address)	
(Mailing Address, if different than street addr	888)
The name and complete street	address of the registered agent:
Michael J. Swope	223 N. 6th Street, Suite 425, Boise, Idaho 83702
(Name)	(Street Address)
The name and address of at leacompany:  Name	est one member or manager of the limited liability
Michael J. Swope	Address 223 N. 6th Street, Suite 425, Boise, Idaho 83702
•	
failing address for future corres	pondence (annual report notices):
	Street, Suite 425, Boise, Idaho 83702
uture effective date of filing (op	tional):
ture of organizer(s). (An organizer	is a member, or is
in behalf of a member or members).)	
ture // w//	Secretary of State use only
d Name: Michael J. Savo	pe I
iture	00 0772000 00 0772000

IDAHO SECRETARY OF STATE

07/29/2008 05:00

CK: 57117 CT: 67242 BH: 1129303
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