

CERTIFICATE OF	
LIMITED LIABIL	ITY COMPANYOLAMAR 31 AM IO. LO
(Instructions on ba	nck of application)
1. The name of the limited liability of	company is: DEUHETARY OF STATE
•	ty management LECATO
1	addresses of the initial designated office:
27 Holden Lane	Grand VIEW, ID 83624
(Street Address)	d VIEW, ID 83624
(Mailing Address, if different than street address	) BOOK
3. The name and complete street ac	Idress of the registered agent:
<b>A</b> 1 6	27 1)
Andrea Owens (Name)	27 Holden Lane Grand View, JO (Street Address) 83624
	03024
	t one member or manager of the limited liability
company: <u>Name</u>	<u>Address</u>
Mark Owens	27 Holden Lane Grand View, ID 83624
Andrea Owens	LI
Aportio Courts	
-	
5. Mailing address for future corresp	ondence (annual report notices).
6) -	View ID Peroly
<u> </u>	Them ( The way)
6. Future effective date of filing (opti	onal):
Signature of a manager, member	or authorized
person.	Secretary of State use only
Signature <u>Indrea Owen</u>	
Signature <u>Andrea Dwens</u> Typed Name: <u>Andrea Owens</u>	<del></del>
0: (	
Signature	IDAHO SECRETARY OF STATE  93/31/2014 95:99
Typed Name:	CK: 1898 CT: 245870 BH: 1417922

CK: 1898 CT: 245870 BH: 1417922 1 2 100.00 = 100.00 ORGAN LLC # 2

W136108

cert\_org\_llc Rev. 07/2010