



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 AUG 25 AM 9:14

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Magic Valley Residential Rentals LLC.

2. The complete street and mailing addresses of the initial designated office:

2390 Rostron Cr. Twin Falls ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Jim Bartholome

(Name)

2390 Rostron Cr. Twin Falls ID 83301

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Jim Bartholome

2390 Rostron Cr. Twin Falls ID 83301

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

2390 Rostron Cr. Twin Falls ID 83301

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: Jim Bartholome

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/25/2014 05:00

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