



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 JAN -5 AM 9:36

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

HOME ZONE LLC

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

10234 S. Raymond rd McCammon ID 83250

(Street Address)

(Mailing Address, if different than street address)

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

J. Roger Morris

(Name)

10234 S. Raymond rd McCammon 83250

(Street Address)

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

**Name**

**Address**

J. Roger Morris

10234 S. Raymond rd McCammon 83250

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

10234 S. Raymond rd McCammon ID 83250

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature J. Roger Morris  
Typed Name: J. Roger Morris

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

Secretary of State use only

9100-pllform-llc formidcert.org llc-PMD  
Revised 07/2008

IDAHO SECRETARY OF STATE  
01/05/2010 05:00  
CK: 1179 CT: 232996 BH: 1201849  
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