

Signature:___

Rev. 08/2015

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

2015 NOV -2 PM 3: 40

STATE OF IDAHO

	Complete and Submit the a	ppricauon in <u>uupticate</u>	i
1.	The name of the limited liability company is:		
	BVMH Properties II, 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:		
	901 Pier View Drive, Suite 201, Idaho Falls, ID 83402		
	(Street Address)		
	PO Box 51298, Idaho Falls, ID 83405		
	(Mailing Address, if different)		
3.	The name and complete street address of the registered agent:		
	Thel W. Casper, Esq.	901 Pier View Drive, Suite 201, Idaho Falls, ID 83402	
	(Name)	(Address)	
4.	The name and address of at least one governor of the limited liability company		
	The name and address of at least one governor of the limited liability company: BV Management Services, Inc. PO Box 51157, Idaho Falls, ID 83405		
	(Name)	(Address)	
		(.22.300)	
	(Name) (Address)		
	(Marie)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	PO Box 51298, Idaho Falls, ID 83405		
	(Address)		
Sigr	nature of organizer(s).		
_	ted Name: Thel W. Casper, Organiz	© F	Secretary of State use only
Prin	ted Name: The VV. Susper, Organiz		
Siar	nature:		IDAHO SECRETARY OF STATE
Oig	Tature.	 _	11/02/2015 05:00
Prin	ted Name:		CK:PREPAID CT:167590 BH:1498863 1@ 100.00 = 100.00 ORGAN LLC #2
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