



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2011 MAY 24 PM 2: 09

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Lake Larson Properties LLC

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

9723 W. George Lane

(Street Address)

Post Falls, ID 83854

(Mailing Address, if different than street address)

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

Vicki Veitkamp Larson

(Name)

9723 W. George Lane, Post Falls, ID 83854

(Street Address)

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

Name

Address

Vicki Veitkamp Larson

9723 W. George Lane, Post Falls, ID 83854

James Robert Larson

9723 W. George Lane, Post Falls, ID 83854

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

9723 W. George Lane, Post Falls, ID 83854

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Vicki Veitkamp Larson

Signature

Typed Name: James Robert Larson

Secretary of State use only

IDAHO SECRETARY OF STATE
05/24/2011 05:00
CK: 685782 CT: 172099 BH: 1275131
1 @ 100.00 = 100.00 ORGAN LLC # 4
1 @ 20.00 = 20.00 EXPEDITE C # 5

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