

## CERTIFICATE OF ORGANIZATION EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application) 2015 FEB 19 AM 8: 55

, , , , , , , , , , , , , , , , , , , ,
1. The name of the limited liability company is:  SECRETARY OF STATE
New Life Housing LLC
2. The complete street and mailing addresses of the initial designated office:
2216 W. Clearvye Ct - Engle Id 83611 (Street Address)
(Mailing Address, if different than street address)
3. The name and complete street address of the registered agent:
Ron Kennely 2216 W. Clear vue of Eglete (Street Address) 83616
4. The name and address of at least one member or manager of the limited liability company:
Row Kennedy 2216 W. Clearvus of Engle Id 83616 Payl Roxius 226 W. Clearvus ct Engle Id 83616
5. Mailing address for future correspondence (annual report notices):
2216 W. Clearvue Ct Engle 7 83616
6. Future effective date of filing (optional):
Signature of a manager, member or authorized person.
Secretary of State use only
Signature 02/19/2015 05:08
Typed Name: Row Kennek
Signature

W148072

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