

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 JUN 20 AM 8: 39

SEC AY OF STATE

1.	The name of the limited liability con		STATE OF IDAHO		
Vulture Properties, LLC					
2.	The complete street and mailing addresses of the initial designated office:  504 E. Grove Avenue, Parma, Idaho 83660  (Street Address) P. O. Box 9, Parma, Idaho 83660-0009  (Mailing Address, if different than street address)				
3.	The name and complete street address of the registered agent:				
	Paul R. Hyde (Name)	504 Gro (Street Address	ve Ave Parma	ID 83660	
4. The name and address of at least one member or manager of the limited lia company:				limited liability	
	<u>Name</u>	ame Addres			
	Paul R. Hyde	P. O. Box 9, Parma, Idaho 83660  P. O. Box 9, Parma, Idaho 83660		<u> </u>	
	Brian D. Hyde				
5.	Mailing address for future correspondence (annual report notices):     P. O. Box 9, Parma, Idaho 83660-0009				
6.	Future effective date of filing (option	al):		<u> </u>	
Sign pers	nature of a manager, member or	authorized			
Sigr	nature ////		Secretar	y of State use only	
Тур	ed Name: Paul R. Hyde, Managing Meml	ber			
_	nature		ID <b>06/</b> CK: 122 1 <b>0</b> 100.		
IVD	ed Name:		T £ 1561	AA 944144 RIDIN	

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Typed Name: \_\_\_\_