## FILED

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY (Instructions on back of application)

09 APR 22 AM 8: 35

SECRETARY OF STATE STATE OF IDAHO

W83352

1. The name of the limited liability company	y is:
NORTH WEST PRO	OPERTY RESULTS LLC.
2. The complete street and mailing address	ses of the initial designated/principal office:
6055 W EBBTIDE DR	COEUR D'ALENE, ID 83814
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address of	of the registered agent:
GARY TOLERICO	6055 W EBBTIDE DR CDA, ID 83814
(Name) (Str	eet Address)
The name and address of at least one me company:	ember or manager of the limited liability
Name	Address
GARY TOLERICO	6055 W EBBTIDE DR CDA, ID 83814
JOAN TOLERICO	6055 W EBBTIDE DR CDA, ID 83814
	,
5. Mailing address for future correspondence	ce (annual report notices):
6055 W EBBTID	DE DR CDA, ID 83814
6. Future effective date of filing (optional): _	MAY 1, 2009
Signature of organizer(s). (An organizer is a memi	ber, or is
acting in behalf of a member or members).	Secretary of State use only
Name of the state	Secretary or State use Only
Signature GARY TOLERICO	IDANO SECRETARY OF STATE  04/22/2009 05 = 00  10 100.00 = 100.00 ORGAN LLC
Typed Name: GARY TOLERICO	Jacob
	IBAHO SECRETARY OF STATE
Signature Herris Mulico	95 05 05 05 05 05 05 05 05 05 05 05 05 05