

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

## FILED EFFECTIVE

2014 FEB 20 AM 9: 55

(Instructions on back of application)

| SECRETARY OF STATE   |
|--|
| 1. The name of the limited liability company is:  OLUNCIANT UT STATE OF MAHO  STATE OF MAHO  |
| Elk Run Outback Condop STATE STATE   |
| 2. The complete street and mailing addresses of the initial designated office:   |
| (Street Address)   |
| Flary Idaho  |
| (Mailing Address, if different than street address)  |
| 3. The name and complete street address of the registered agent:   |
| Money Hutary 1401 E. Rd. Deary Id. (Street Address) 83823  |
| 4. The name and address of at least one member or manager of the limited liability company:  |
| Name Helmanty 1401 E. Rd Deary dates  Doug Flutarty 1401 E. Rd. Huy 183823   |
| Doug Flutarty 1401 & Rd. Klury Lauro 83823   |
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|  |
|  |
| 5. Mailing address for future correspondence (annual report notices):  |
| 1401 6. Rd. Deary Stapp 83823  |
| TIOT GO TO PORTUGE BELOW   |
| 6. Future effective date of filing (optional):   |
|  |
| Signature of a manager, member or authorized person.   |
| Secretary of State use only  |
| Signature Kulling Such July  |
| Typed Name:  |
| Signature Signat |
| Typed Name: 1 8 100.08 = 100.09 ORGAN LLL # C  |

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Typed Name: