



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2012 JUN 27 AM 9:21

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

IRIS FALLS, LLC

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

3235 MOUNTAIN VIEW DRIVE, BOISE, IDAHO 83704
(Street Address)

(Mailing Address, if different than street address)

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

PAUL A. HOFFMAN
(Name)

3235 MOUNTAIN VIEW DRIVE, BOISE
(Street Address)
IDAHO, 83704

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

Name

Address

PAUL A. HOFFMAN

3235 MTN. VIEW DR., BOISE, ID. 83704

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

3235 MTN. VIEW DR., BOISE, IDAHO 83704

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

Signature of a manager, member or authorized person.

Signature

Typed Name: PAUL A. HOFFMAN

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
06/27/2012 05:00
CK: 5105 CT: 216265 BM: 1329905
1 @ 100.00 = 100.00 ORGAN LLC # 2

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