

Signature_

Typed Name:

CERTIFICATE OF ORGANIZATIONED EFFECTIVE LIMITED LIABILITY COMPANY

10 AUG -2 AM R: L.

(Instructions on back of application)

| <u> </u> | (IIIStructions on baci | (or application) | - mi 0: 44 |
|------------------------|--|--|--------------------------------------|
| l. The name o | f the limited liability co | mpany is: | SECRETARY OF STATE STATE OF IDAHO |
| | Co | smos Properties, LLC | STATE OF IDAHO |
| <u>=</u> ' | ga Dr.; Moscow, ID 83843 | Idresses of the initial desi | gnated/principal office: |
| (Mailing Addres | s, if different than street address) | | |
| , , | | ress of the registered age | ent: |
| Jason Barne | \$ | 409 Conestoga Dr.; Moscow, ID 83843 | |
| (Name) | | (Street Address) | |
| company: | <u>Name</u> | • | dress |
| Jason W. Ba | mes | 409 Conestoga Dr.; Moscow, ID 83843 | |
| Gwendolyn (| D. Barnes | 409 Conestoga Dr.; Moscow, ID 83843 | |
| Wayne M. Ba | ames | 11 Princeton Ave.; University City, MO 63130 | |
| Nancy L. Ba | rnes | 11 Princeton Ave.; University City, MO 63130 | |
| _ | ress for future correspo ga Dr.; Moscow, ID 83843 | ndence (annual report no | tices): |
| 6. Future effec | tive date of filing (optio | nal): | |
| Signature of a person. | manager, member o | r authorized | |
| Signature | GON GERNA | | Secretary of State use only |
| Typed Name | ason W. Barnes | | |

IDAHO SECRETARY OF STATE
08/02/2010 05:00
CK: 2286 CT: 250053 BH: 1232927
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