## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 APR -9 AM 8: 45

(Instructions on back of application)

	e area of a calculation and a calculation	TURE PROFESSION
The name of the limited liability company is:		STATE OF THE STATE
American Falls Property Manageme	nt LLC	- 17 M - 14 和 12 11 11 11 11 11 11 11 11 11 11 11 11
<ol> <li>The complete street and mailing</li> <li>724 Hutchinson Ave American Falls</li> </ol>		al designated office:
(Street Address) PO Box 477 American Falls, ID 832 (Mailing Address, if different than street address)		
The name and complete street	address of the register	red agent:
Ashley Kunz		e American Falls, ID 83211
(Name)	(Street Address)	
company:  Name  Ashley Kunz	724 Hutchinson Av	Address e American Falls, ID 83211
<ol> <li>Mailing address for future corre</li> <li>PO Box 477 American Falls, ID 832</li> </ol>	· ·	port notices):
6. Future effective date of filing (c	optional):	
Signature of a manager, memberson.	er or authorized	
0		Secretary of State use only
Signature <u>(While of it</u> yped Name: Ashley Kunz)	n2	
Signature		IDAHO SECRETARY OF STATE 04/09/2014 05:00
Typed Name:		CK: 21612448517 CT: 295454 BH: 1419 1 @ 100.08 = 100.00 ORGAN LLC # ;

cert\_org\_lic Rev. 07/2010

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