



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 JUL -3 PM 2:12

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

RRE LLC

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

516 S. Capitol Blvd. Boise Id 83712

(Street Address)

(Mailing Address, if different than street address)

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

Roxana Heisler

(Name)

845 E. Pennsylvania Dr. Boise Id 83706

(Street Address)

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

Name

Address

Roxana Heisler

845 E. Pennsylvania Dr. Boise Id 83706

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

516 S. Capitol Blvd. Boise Id 83712

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Roxana Heisler

Typed Name: Roxana Heisler

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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07/03/2013 05:00  
CK: 146500 CT: 172099 BH: 1380792  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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