

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

		OF ORGANIZ	ATION	FILED EFFECTIVE TO SECRETARY OF STATE OF THE
医多型 (1) 图 9		LITY COMPA	NY	APR
	30, Chapters 21 and 2			ECRETAL AMO
	g fee: \$100 typed, \$12	- '		"ATEOLOGICA" 20
Com	plete and submit the a	pplication in <u>duplicate</u> .	•	OF TOARTATE
	ne limited liability cor	• •		<i>,</i> , ,
	PROPERTY MANA			
(Remem	ber to include the words "Li	mited Liability Company," "L	Limited Company," o	or the abbreviations L.L.C., LLC, or LC)
The complete	street and mailing a	ddresses of the princ	cipal office is:	
-	-	t Falls, ID 83854-689	•	
(Street Address)				
(Mailing Address, if di	fferent)			
The name of the	ne registered agent	and the street addres	ss of the regist	ered agent:
HOWARD L.	RUDE	6426 E. Maplew	ood Avenue, F	Post Falls, ID 83854-6898
(Name)		(Address cannot be a po		
HOWARD L. F		one governor of the 6426 E. Maplewo	•	ost Falls, ID 83854-6898
(Name)		(Address)		
(Name)		(Address)		
(Name)		(Address)		
(Name)		(Address)		
Mailing addres	s for future correspo	ondence (annual rep	ort notices):	
_	•	Falls, ID 83854-689	•	
(Address)				
atura of organia	eor(e)			
ature of organiz	1	0 - 1	Sec	cretary of State use only
ature:	toward	Ruse		FRILIS GGGNNAGINI SA SANSA
nd Nama, HOV	VARD L. RUDE			OAHO SECRETARY OF STATE 04/01/2016 05:00
ed Name: 1101		·	1	04/01/2010 05.00 80487 CM-4368 88.183128

Signature:

Printed Name: ---

10 100.00 = 100.00 ORGAN LLC #2

FILED EFFECTIVE

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