Typed Name: _____



CERTIFICATE OF ORGANIZATION

	LIMITED LIABIL	ITY COMPA	NY FILED EFFECT
	(Instructions on back of application)		SECRETARY OF 51
1. The	name of the limited liability o	ompany is:	STATE OF IDAH
	•	Real Estate Investments	s, LLC
2. The	complete street and mailing a	addresses of the ini	tial designated office:
	S. 1800 W., Rexburg, ID 83440 et Address)		<u> </u>
(Maili	ng Address, if different than street address)	
3. The i	he name and complete street address of the registered agent:		
Byro	n Luthy	7450 S. 1800 W.,	Rexburg, ID 83440
(Nam	e)	(Street Address)	
4. The r	name and address of at least pany: <u>Name</u>	one member or ma	anager of the limited liability Address
Byro	n Luthy	7450 S 1800 W	Rexburg, ID 83440
	nt Luthy	72 E. 7800 S., Rexburg, ID 83440	
Kem	y Luthy	7830 N. Hwy. 38, Honeyville, UT 84314	
Kevi	n Luthy	2390 E. 3580 S., St. George, UT 84790	
	ng address for future corresp S. 1800 W., Rexburg, ID 83440	ondence (annual re	eport notices):
6. Futur	re effective date of filing (opti	onal):	
Signatur person.	e of a manager, member o	or authorized	
Signature	Before Luit arne: Bryon Luthy, Member	They	Secretary of State use only
Signatura			IDAHO SECRETARY OF STATE

CK: NONE CT: 113824 BH: 1394941 1 0 100.00 = 100.00 ORGAN LLC # 2

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