



CERTIFICATE OF ORGANIZATION **FILED EFFECTIVE**
LIMITED LIABILITY COMPANY **2013 NOV -4 AM 11:01**

(Instructions on back of application)

SECRETARY OF STATE
 STATE OF IDAHO

1. The name of the limited liability company is:

CREWS HOUSE LLC

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

19819 FRANKLIN RD NAMPA IDAHO 83687

(Street Address)

(Mailing Address, if different than street address)

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

PAULA L DRINKARD-BONDS

(Name)

8080 E DRINKARD NAMPA ID 83687

(Street Address)

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

Name

PAULA L DRINKARD-BONDS

Address

8080 E DRINKARD NAMPA ID 83687

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

19819 FRANKLIN RD NAMPA ID 83687

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Paula Drinkard-Bonds
 Typed Name: PAULA L DRINKARD-BONDS

Secretary of State use only

Signature _____

Typed Name: _____

IDaho SECRETARY OF STATE
 11/05/2013 05:00
 CK: CASH CT: 289331 BH: 1396789
 1 P 100.00 = 100.00 ORGAN LLC # 2

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