

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 APR 22 AM 10: 32

| TE TO | (Instructions on ba | ck of application) | SECRETARY OF STATE | |
|---------------------------------------|---|--|--|--|
| 1. The name | e of the limited liability c | ompany is: | STATE OF IDAHO | |
| · | Isla | nd Park Pond's Lodge, L | <u>.c</u> | |
| 2. The comp | plete street and mailing a | addresses of the initia | al designated/principal office: | |
| | | ive, Suite 200, Idaho Fall | s, Idaho 83405 | |
| (Street Add | | 630 Idaho Falls, Idaho 8 | 3405-1630 | |
| (Mailing Add | dress, if different than street address |) | | |
| 3. The name | e and complete street ad | dress of the register | ed agent: | |
| Douglas R. Nelson | | 490 Memorial | 490 Memorial Drive, Idaho Falls, Idaho 83405 | |
| (Name) | | (Street Address) | | |
| 4. The name company | • | one member or mar | nager of the limited liability | |
| | <u>Name</u> R.J. Cardwell | Address P.O. Box 1386, Rancho Santa Fe, CA 92067 | | |
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| 5. Mailing a | ddress for future corresp | • • | • | |
| | c/o K.J. Cardwell P. | O. Box 1386, Rancho Sa | Inta Fe, CA 92067 | |
| 6 Future ef | fective date of filing (opti | onal): | | |
| J atai 0 01 | uato or ming topu | | | |
| Signature of a | organizer(s). (An organizer i | s a member or is | | |
| - | of a member or members). | | | |
| • | 0.00 | no la g | Secretary of State use only | |
| Signature | Unglask! | 1 3 | | |
| Typed Name: Douglas R. Nelson, attorn | | ttorney 5 | w92664 | |
| A | | ttorney Commission of The PAD Revised 0772000 | VV 100 - 1 | |
| Signature | | DIO PER | IDAHO SECRETARY OF STATE 04/22/2018 05: | |
| Typed Name | yped Name: | | CK: 52825 CT: 2034 BH: 121 | |