CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2013 JAN 24 AM 9:57

(Instructions on back of application)

(on paon of approaution,	OF MOTHER OF OTATE
1. The name of the limited liak	oility company is:	SECRETARY OF STATE STATE OF IDAHO
Lake Apts. 1020 LLC		VIAN. OF IOURO
The complete street and ma 1020 Lake Ave. Idaho Falls, Ida	•	esignated office:
(Street Address)		
(Mailing Address, if different than street	address)	
3. The name and complete str	eet address of the registered a	agent:
Lynn A. Kerzman	245 N. Karey Lane Idaho Falls, Idaho 83402	
(Name)	(Street Address)	
The name and address of a company:	t least one member or manage	er of the limited liability
<u>Name</u>		Address
Cynthia R. Kerzman	245 N. Karey Idaho Fa	alls, Idaho 83402
5. Mailing address for future co	orrespondence (annual report 3975 Silverado Dr. Idaho Falls, Ida	•
6. Future effective date of filing	្ស (optional):	
Signature of a manager, men	nber or authorized	
•		Secretary of State use only
Signature Lynn A. Kerzman 2	00 200 2261	
Typed Name: Lynn A. Nerzingh 2	00-030-030 i	

IDAHO SECRETARY OF STATE

01/24/2013 05:00

CK: 1070 CT: 278553 BH: 1357047
1 0 100.00 = 100.00 OKGAN LLC # 3

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Signature (

Typed Name: Cynthia R. Kerzman