

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY25 AM 9:32

(Instructions on back of application)

The name of the limited liability co	ompany is: STATE OF IDAHO
24 H	our Property Management , L L C
The complete street and mailing a 16070 Idaho Center Blvd, suite 102, Na (Street Address)	ddresses of the initial designated/principal office:
<u></u>	
(Mailing Address, if different than street address)	
The name and complete street ad	dress of the registered agent:
Timothy Bassett	1524 E York Ave, Nampa, Idaho 83686
(Name)	(Street Address)
The name and address of at least one member or manager of the limited liability company:	
<u>Name</u>	<u>Address</u>
Timothy Bassett	1524 E York Ave, Nampa, Idaho 83686
	<u> </u>
5. Mailing address for future correspond	ondence (annual report notices):
1524 E York Ave, Nampa, Idaho 83686	
6. Future effective date of filing (option	onal):
Signature of a manager, member of person.	or authorized
Signature Churchy D. Burl	Secretary of State use only
Typed Name:	assett
Signature	IDAHO SECRETARY OF STATE
Typed Name:	CK: 15934 CT: 249489 BH: 1283809 1 8 100.00 = 100.00 ORGAN LLC # 2

cert org fic Rev 07/201