

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 JUN 20 AM 9: 40

11:0	(Instructions on	back of application)	SECRET BY OF STATE
1. The name of	the limited liability	y company is:	SECRED BY OF STATE OF IDAHO
		Mulian House, LLC	<u> </u>
•	street and mailin	g addresses of the initial des alls, ID 83854	ignated/principal office:
(Street Address)			
(Mailing Address, i	if different than street addr	ess)	
3. The name and	d complete street	address of the registered age	ent:
Gary A. Strong		3719 North Cleveland Cou	rt, Post Falls, ID 83854
(Name)		(Street Address)	
4. The name and company:	d address of at lea	ast one member or manager	of the limited liability
	<u>Name</u>		Idress
Gary A. Strong		3719 North Cleveland Cou	rt, Post Falls, ID 83854
· ·	ss for future corre	spondence (annual report no alls, ID 83854	tices):
6. Future effective	re date of filing (o	ptional):	
Signature of a m	nanager , membe	or authorized	
	7		Secretary of State use only
Signature (y A. Strong		
Typed Name: Gal	y A. Strong		
Signature			IDAHO SECRETARY OF STATE
Typed Name: Key	vin Frame	ł	06/20/2011 05:00

cert_org_lic Rev. 07/2010

CK: 7045 CT: 24405 BH: 1279170 1 0 100.00 = 100.00 ORGAN LLC # 2

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