i.



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2014 MAR 12 AM 9: 17

| \$ 0. Kg | (Instructions on back | of application) | SECRETARY OF STATE |
|------------|--|---|--|
| 1. The n | ame of the limited liability com | npany is: | STATE OF DAHO |
| Quinr | n Property Management, L.L.C. | | Sign N. V. Land Mar. C. |
| 2. The c | omplete street and mailing add | dresses of the initial de | esignated office: |
| 8 Elsi | ie Peak Court, Pinehurst, Idaho 8385 | 50 | |
| • | Address) Box 523, Pinehurst, Idaho 83850 | | |
| | g Address, if different than street address) | | |
| 3. The n | ame and complete street addre | ess of the registered a | agent: |
| Tama | ara White | 8 Elsie Peak Court, Pine | ehurst, Idaho 83850 |
| (Name |) | (Street Address) | |
| 4. The n | ame and address of at least or any: Name | ne member or manag | er of the limited liability |
| Tama | ara White | P.O. Box 523, Pinehurs | |
| 49e Patri | ck Quinn | P.O. Box 523, Pinehurs | |
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| | | | |
| 5. Mailir | ng address for future correspor | ndence (annual report | notices): |
| | Box 523, Pinehurst, Idaho 83850 | | |
| | | | |
| 6. Futur | e effective date of filing (option | nal): | |
| | | | |
| Signatur | e of a manager, member or | authorized | |
| person. | • | particular description of the second | Secretary of State use only |
| Signature | : Vamora White | | , |
| Typed Na | ame: Tamara White | | W135386 |
| i ypeu ivo | AIIIG. | | W132364 |
| | | | TRANS CECRETARY OF CTAT |
| Signature | • | | IDAHO SECRETARY OF STAT 03/12/2014 05 |
| | eame: | | 03/12/2014 05 CK: NO CK # CT: 218347 BH: 1 0 100.00 = 100.00 ORGAN |

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9/21/2012