



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAY -5 AM 10:14

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Legends Real Estate LLC

2. The complete street and mailing addresses of the initial designated office:

3256 Ridge Place Twin Falls, ID 83301

(Street Address)

PO Box 5491 Twin Falls, ID 83303

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Lexi Lee Roth

(Name)

3256 Ridge Place Twin Falls, ID 83301

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Lexi Lee Roth

3256 Ridge Place Twin Falls, ID 83301

5. Mailing address for future correspondence (annual report notices):

PO BOX 5491 Twin Falls, ID 83303

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person

Signature

Typed Name: Lexi Lee Roth

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/05/2014 05:00

CK:234 CT:296483 BH:1423333

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