



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2013 OCT 18 PM 2:11

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

1223 Garland, LLC

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

9387 N. Snaffle Bit Ln., Kuna, ID 83634

(Street Address)

(Mailing Address, if different than street address)

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

Tami McHugh

(Name)

9387 N. Snaffle Bit Ln., Kuna, ID 83634

(Street Address)

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

Name

Address

Tami McHugh

9387 N. Snaffle Bit Ln., Kuna, ID 83634

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

9387 N. Snaffle Bit Ln., Kuna, ID 83634

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Tami McHugh

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/18/2013 05:00
CK: 3345 CT: 203725 BH: 1394546
1 @ 100.00 = 100.00 ORGAN LLC # 2

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