

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 0CT 29 AM 8: 32

<u> </u>	(Instructions on	back of application)	SECT DV OF	
1.	. The name of the limited liability company is:		SECTOR BY OF STATE	
		Duffin Five, LLC		
2.	The complete street and mailin 10833 Paintbrush, Pocatello, ID 83		designated/principal office:	
	(Street Address)			
	(Mailing Address, if different than street add	ress)		
3.	The name and complete street address of the registered agent:			
	Eric Wade Duffin	10833 Paintbrush, Pocatello, ID 83202		
	(Name)	(Street Address)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address	
	Eric Wade Duffin	10833 Paintbrush, Pocatello, ID 83202		
		· .		
5.	Mailing address for future correspondence (annual report notices):			
	10833 Paintbrush, Pocatello, ID 832	02		
6.	Future effective date of filing (o	otional):		
Sigr pers	lature of a manager, membe	r or authorized		
pois	on.	1	Secretary of State use only	
	ature melales			
Туре	ed Name: Eric Wade Duffin			
Sia-	atura		IDAHO SECRETARY OF STATE 10/29/2010 05:00	
	atureed Name:e	***	CK: 37397 CT: 252387 BH: 1245186 1 0 198.00 = 100.00 ORGAN LLC # 2	
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