

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

1. The name of the limited liability company is: FILED EFFECTIVE

Street Address)		
Mailing Address, if different)		
The name and complete stree	et address of the registered a	gent:
Jacqueline G Groves	1365 E Corniche Ct.	, Boise ID 83706
Name)	(Address)	<del></del>
**************************************		A De La Maria
ine name and address of at I	east one governor of the limit	ed liability company:
	<del>-</del>	D 1 1D 00000
Jacqueline G Groves, Trustee	e 1365 E Corniche Ct.	Boise ID 83706
Jacqueline G Groves, Truste	e 1365 E Corniche Ct.	
Jacqueline G Groves, Truste	e 1365 E Corniche Ct.	, Boise ID 83706
Jacqueline G Groves, Trustee Name) Nu chaul 5 Simpson 7	e 1365 E Corniche Ct.	
Jacqueline G Groves, Trustee Michael 5 Simpson 7 Name)	e 1365 E Corniche Ct.	
Jacqueline G Groves, Trustee Name) Name)	(Address)  (Address)	
Jacqueline G Groves, Trustee Michael 5 Simpson 7	e 1365 E Corniche Ct.	
Jacqueline G Groves, Trustee Name) Name)	(Address)  (Address)	
Jacqueline G Groves, Trustee Name) Name)	(Address)  (Address)	
Jacqueline G Groves, Trustee Name) Name) Name)	(Address)  (Address)  (Address)  (Address)	ll
Jacqueline G Groves, Trustee Name) Name) Name)	(Address)  (Address)  (Address)  (Address)  (Address)  respondence (annual report respondence)	ll

Printed Name:

Rev. 08/2015

Signature:

Signature:

IDAMO SECRETARY OF STATE

10/22/2015 05:00

CK:1011 CT:315955 BH:1497355 10 100.00 = 100.00 ORGAN LLC #2

11157630