

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUL 22 AM 9: 02

The name			
me name	of the limited liab	bility company is:	SECRETARY OF STA STATE OF IDAHO
		FULL CIRCLE REAL ESTATE, LLC	THE OF IDAILO
The comp	lete street and ma	ailing addresses of the initial de	signated/principal office:
		696 S Truss Ave, Meridian ID 83642	organica principal office.
(Street Addre	6S)		
(Mailing Addr	ess, if different than street :	address}	
The name	and complete stre	eet address of the registered ag	lent:
		or the registered ag	jerit.
	Joanna Bennett	696 S Truss Ave	e, Meridian ID 83642
(Name)		(Street Address)	
The name company:	and address of at	least one member or manager	of the limited liability
	Name		ddress
<u> </u>	Joanna Bennett	696 S. Truss Ave	e, Meridian ID 83642
,			
			
Mailing add	iress for future cor	mesnondence (annual report no	tions).
Vailing add		rrespondence (annual report no 96 S. Truss Ave. Meridian ID 83642	etices):
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