



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 APR 10 AM 9:07

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Amber Inn Motel, LLC

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

17286 US HWY 30

(Street Address)

Bliss, ID 83314

(Mailing Address, if different than street address)

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

Todd Victor

(Name)

17286 US HWY 30 Bliss, ID 83314

(Street Address)

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

Name

Address

Todd Victor

PO BOX 2491 Pocatello, ID 83206

Steph Victor

PO BOX 2491 Pocatello, ID 83206

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

PO BOX 2491 Pocatello, ID 83206

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

Signature of a manager, member or authorized person.

Signature

Stephanie Victor

Typed Name:

Stephanie Victor

Signature

Todd Victor

Typed Name:

Todd Victor

Secretary of State use only

IDAHO SECRETARY OF STATE
04/10/2014 05:00
CK: 16239 CT: 295506 BH: 1419629
1 @ 100.00 = 100.00 ORGAN LLC # 2

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