

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

2012 OCT 29 AM 9: 22

(Instructions on back of application)

The name of the limited liabili Abode LLC	ty company is:	STATE OF IDAHO	
The complete street and mailing South Euclid Avenue, Sandpo	~	designated office:	
(Street Address)			
(Mailing Address, if different than street ad	dress)		
3. The name and complete stree	t address of the registered	agent:	
Beverly Kee	502 South Euclid Ave,	502 South Euclid Ave, Sandpoint, ID 83864	
(Name)	(Street Address)		
The name and address of at le company: Name	east one member or manaç	ger of the limited liability	
Beverly Kee	502 S. Euclid Ave, Sandpoint, ID 83864		
5. Mailing address for future corr	esnondence (annual renor	t notices):	
Beverly Kee, 502 S. Euclid Ave, S	. , , , , , , , , , , , , , , , , , , ,	t Housesy.	
6. Future effective date of filing (optional): <u>11/01/2012</u>		
Signature of a manager, memb	er or authorized		
person.	\bigcirc / \Box	Secretary of State use only	
Signature Muly (1/cm	•	
Typed Name: Beverly A. Kee			
Signature		TRAHO SECRETORY OF STATE	
Typed Name:		19/29/29/2012 05:00	
		1 8 188 01: 223313 BH: 1343433	

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