

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2014 MAR 11 AM 8: 45

1.	The name of the limited liability co	ompany is:	SECRETARY OF STATE
	Sweetbriar Circle, LLC		
2.	The complete street and mailing addresses of the initial designated office:  12280 E. Highway 20; Mountain Home ID 83647  (Street Address) same		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Van Lamb (Name)	12280 E. Highway 20; Mountai	n Home ID 83647
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Address	
	Van Lamb	12280 E. Highway 20; Mountain Home ID 83647	
	Bobbi (Barbara) Lamb	12280 E. Highway 20; Mountain Home ID 83647	
5.	Mailing address for future correspo	ondence (annual report notice	es):
	Sweetbriar Circle, LLC; 12280 E. Highway 20; Mountain Home ID 83647		
6.	Future effective date of filing (option	onal):	
	nature of a manager, member o	or authorized	
Sig	nature Van Lam	Sec	cretary of State use only
	nature But Amb	1	IDAHO SECRETARY OF STATE 3/11/2014 05:00 3585 CT: 294122 BH: 1414627 98.00 = 100.00 ORGAN LLC # 2

W135368

Typed Name: Bobbi Lamb