



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 SEP -5 PM 3:43
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Palm Valley LLC

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

(Street Address)

1801 North Elder Street, Nampa, ID 83687-3079

(Mailing Address, if different than street address)

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

S. Michael Guthrie

(Name)

1801 North Elder Street, Nampa, ID 83687-3079

(Street Address)

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

Name

S. Michael Guthrie

Address

1801 North Elder Street, Nampa, ID 83687-3079

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

1801 North Elder Street, Nampa, ID 83687-3079

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

Signature of a manager, member or authorized person.

Signature: Thomas G. Walker
Typed Name: Thomas G. Walker, Counsel

Secretary of State use only

Signature _____
Typed Name: _____

IDaho SECRETARY OF STATE
09/05/2012 05:00
CK: 24616 CT: 4643 BH: 1338639
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