

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT -7 AM 10: 15

SECRETARY OF STATE

		STATE OF IDAHO
1. The name of the limited liability	company is:	Office of the first
Andrew Family Rentals, LLC		
2. The complete street and mailing 3298 North Five Mile Road, Boise, ID (Street Address)		e initial designated office:
(Mailing Address, if different than street address	ss)	
3. The name and complete street a		gistered agent:
Barbara Woolf	3298 North Five Mile Road, Boise, ID 83713	
(Name)	(Street Address)	
The name and address of at least company: Name Barbara Woolf		Address Mile Rd., Boise, ID 83713
 Mailing address for future corres 3298 North Five Mile Road, Boise, ID 	•	al report notices):
6. Future effective date of filing (op	tional):	
Signature of a manager, member person.	or authorized	
R la la col		Secretary of State use only
Signature <u>DMOMA U</u> Typed Name: <u>Barbara Woolf</u>	704	IDAHO SECRETARY OF STATE 10/07/2014 05:00 CK:1311 CT:291161 BH:144423
_		16 100.00 = 100.00 ORGAN LLC
Signature Typed Name:		W11129912
rybed Name:		~ 1 P P L DI IV

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