


Complete and submit the application in duplicate.

SECRETARY OF STATE
STATE OF IDAHO

- | | | |
|---|--|--|
| 1. | The name of the limited liability company is: | |
| | <u>Providence Properties, LLC</u> | |
| 2. | The date the certificate of organization was originally filed : <u>4/4/2013</u> | |
| 3. | The name of the limited liability company is amended to: | |
| | <u></u> | |
| 4. | The complete street and mailing addresses of the principal office is amended to: | |
| | <u>(Street Address)</u> | |
| | <u>(Mailing Address, if different)</u> | |
| 5. | The mailing address for future correspondence (annual reports) is amended to: | |
| | <u>(Address)</u> | |
| 6. | The name and address of the managers/members shall be amended as follows: | |
| Add: <input checked="" type="checkbox"/> Delete: <input type="checkbox"/> | <u>Layne Bell</u> | <u>701 S Allen Street, Suite 104, Meridian, ID 83642</u> |
| | (Name) | (Address) |
| Add: <input checked="" type="checkbox"/> Delete: <input type="checkbox"/> | <u>Joe Swenson</u> | <u>701 S Allen Street, Suite 104, Meridian, ID 83642</u> |
| | (Name) | (Address) |
| Add: <input type="checkbox"/> Delete: <input type="checkbox"/> | <u></u> | <u></u> |
| | (Name) | (Address) |
| 7. | Signature of a manager, member, or authorized person. | |
| Printed Name: | <u>E Don Hubble, Managing Member</u> | |
| Signature: | <u></u> | |
| Printed Name: | <u></u> | |
| Signature: | <u></u> | |

Secretary of State use only

IDAHO SECRETARY OF STATE
01/08/2016 05:00
CK:1028 CT:292069 BH:1507762
1@ 30.00 = 30.00 ORGAN AMEN #2

W173915

Rev 08/2015

CK:1028 CT:292069 BH:1507762
1@ 30.00 = 30.00 ORGAN AMEN #2

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