## CERTIFICATE OF ORGANIZATION

LIMITED I	LIABILITY CO	MPANY	SECRETARY OF STATE STATE OF IDAHO
(Instructi	(Instructions on back of application)		
1. The name of the limited	l liability company is:		
	L & H Enterprises Inv	vestments, LLC	
2. The complete street and	l mailing addresses of	the initial designate	ed/principal office:
(Street Address)	4610 N. Maple Grove Ro	i., Boise, ID 83704	
(Mailing Address, if different than	etreet sridnees		
3. The name and complete	·	registered agent:	
Lee M. Healy	Lee M. Healy 4610 N. Maple Grove		Boise, ID 83704
(Name)	(Street Add	ress)	or .
4. The name and address company:	of at least one membe	er or manager of the	limited liability
<u>Name</u>		Address	
Lee M. Healy	46	10 N. Maple Grove Rd.,	Bolse, ID 83704
Henrietta B. Hea	ily 46	10 N. Maple Grove Rd.,	Boise, ID 83704
	•		
			**************************************
5. Mailing address for futur	e correspondence (ar 4610 N. Maple Grove Ro		
S. Future effective date of t	filing (ontional):		e Allendaries III.
o. I-didia anachiva data ori	iiing (optional).	•	
ignature of organizer(s). (An		is	
cting in behalf of a member or m	an //		ary of State use only
ignature	11 Heary	smsVLC formsteat org licPND intend 07/2008	
yped Name:Le	e M. Healy	alcert or	
!		D1/2008	TRAUN GEFRETARY OF STATE
ignature		msV.	IDAHO SECRETARY OF STATE 11/20/2009 05:(

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