

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

10 FEB 11 AM 8: 09

<b>*</b>	(Instructions on back	of application)	CEPDETAIN OF OTI-
1.	The name of the limited liability com	npany is:	SECRETARY OF STA <b>TE</b> STATE OF IDAHO
	Hanna, LLC		
	The complete street address, and m principal office:	ailing address i	f different, of the initial designated/
	12625 W Scotfield, Bo	oise, ID 83	3713
	The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:		
	Michael L. Simplot, 12625 W Scotf	field. Boise, ID	83713
	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	MLS Properties L.P.	12625 W Scot	field, Boise, ID 83713
-			
5	Mailing address for future correspon	dence (annual	report notices):
•	12625 W Scotfield, Boise, ID 8371	•	
			•
3.	Future effective date of filing (option	al):	
	nature of an organizer(s), (An organizer acting in behalf of a required, and existing, i		
	embers		Secretary of State use only
		org Hc.PMD	
_	nature Christina E Nichalas		
yp.	ed Name: Christine E. Nicholas	formsk	
Sior	nature	polyometic formsky	IDAHO SECRETARY OF STATE  92/11/2010 05:0
_	nature		CK: NONE CT: 1117 BH: 12076; 1 0 100.00 = 100.00 ORGAN LLI

Client:1513059.1

W90558