

Typed Name: \_\_\_\_\_

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2014 JAN -9 AM 9: 02

1.	The name of the limited liability company is:
	RAT Greenleaf LLC STATE OF DATO
2.	The complete street and mailing addresses of the initial designated office:  503 10th Ave South, Names Id 83651  (Street Address)
	(Mailing Address, if different than street address)
3.	The name and complete street address of the registered agent:
	Tracy J. Herzog 503 10th Ave. So. Nampa Id (Name) (Street Address) 83651
4.	The name and address of at least one member or manager of the limited liability company:
	Ronald C. Herzog 503 10th Ave So, Nampa Id 8361
5.	Mailing address for future correspondence (annual report notices):  503 101 Ave South, Nampa, Id 88651
6.	Future effective date of filing (optional):
	nature of a manager, member or authorized
Sig	nature
Sig	Mature

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