

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 OCT 24 AM 8: 32

SECRETARY OF STATE STATE OF IDAHO

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1.	The name of the limited liability co	ompany is:
	SUN MOU	JNTAIN VENTURE GROUP LLC
2.		iddresses of the initial designated/principal office: TH NORTH, IDAHO FALLS, ID 83401
	(Street Address) (Mailing Address, if different than street address)	(SAME)
3.	The name and complete street address of the registered agent:	
	BARRY SOUTH (Name)	3007 EAST 49TH NORTH, IDAHO FALLS, ID 83401 (Street Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	<u>Name</u>	<u>Address</u>
	BARRY SOUTH	3007 EAST 49TH NORTH, IDAHO FALLS, ID 83401
	Mailing address for future correspo	
	3007 EAST 49TH NORTH, IDAHO FALLS, ID 83401	
•	Future effective date of filing (option	nal):
gr tin	nature of organizer(s). (An organizer is a g in behalf of a member or members).	a member, or is
	nature Bany South	Secretary of State use only
/pe	ed Name: BARRY SOUTH	OW 25 8000 IDAHO SECRETARY OF STATE 10/24/2008 05 = 0 CK: 13460 CT: 78036 RH: 11415 CK: 13460 CT: 78036 RH: 11415
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/pe	ed Name:	