

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

## **FILED EFFECTIVE**

2014 MAR 18 AM 9: 31

SECRETARY OF STATE

ا* ال مرسوس	
The complete street and mail 1015 SW ISAAC LN MOUNTAIN	ing addresses of the initial designated office: HOME ID 83647
(Street Address)	
(Mailing Address, if different than street a	ddress)
<ol><li>The name and complete stre</li></ol>	et address of the registered agent:
ALICE ASH	30 S 200 W BURLEY ID 83318
(Name)	(Street Address)
company: <u>Name</u> IRENE THOMAS	Address 1015 SW ISAAC LN MOUNTAIN HOME ID 83647
IRENE THOMAS	1019 944 ISAAC EN MOONTAIN HOWE TO 00047
•	orrespondence (annual report notices):
5. Mailing address for future co	-
1015 SW ISAAC LN MOUNTAIN	N HOME ID 83647
1015 SW ISAAC LN MOUNTAIN  6. Future effective date of filing	y (optional):
1015 SW ISAAC LN MOUNTAIN  6. Future effective date of filing  Signature of a manager, men	n HOME ID 83647 g (optional): nber or authorized
1015 SW ISAAC LN MOUNTAIN  6. Future effective date of filing  Signature of a manager, mentoerson.	n HOME ID 83647 g (optional): mber or authorized Secretary of State use only
6. Future effective date of filing Signature of a manager, men person.	n HOME ID 83647 g (optional):  mber or authorized  Secretary of State use only
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