

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY_{08 SEP 15 AM 9: 42}

(Instructions on back of application)

1.	The name of the limited liability comp	pany is: STATE OF IDAHO
	L & S LA	AND HOLDINGS, LLC
2.	2. The complete street and mailing addresses of the initial designated/principal office: 2930 S. 2300 E., WENDELL ID 83355 (Street Address)	
	(officer state cost)	
	(Mailing Address, if different than street address)	
3.	3. The name and complete street address of the registered agent:	
	LUIS M. BETTENCOURT	2930 S. 2300 E., WENDELL ID 83355
	(Name)	(Street Address)
4.	company:	e member or manager of the limited liability
	Name	Address
	THE LUIS M. AND SHARON	2930 S. 2300 E., WENDELL ID 83355
	BETTENCOURT 2008 TRUST U/A/D	
	MARCH 5, 2008	
_		
5. Mailing address for future correspondence (annual report notices):		· · · · · · · · · · · · · · · · · · ·
	2930 S. 2300	E., WENDELL ID 83355
6.	Future effective date of filing (optional)	:
Sigr	nature of organizer(s). (An organizer is a me	ember, or is
actin	g in behalf of a member or members).	
		Secretary of State use only
_	nature	DWD DWD
Тур	ed Name: LUIS M. BETTENCOURT, TRU	STEE \$ W77679
	1 Sta	IDAHO SECRETARY OF STATE 90/15/2008 05:00 CK: 20861 CT: 1660 BH: 1135850 1 2 100.00 = 100.86 ORGAN LLC 1
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Тур	ed Name:	CK: 20861 CT: 1660 BH: 1135850
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