

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY

2006 J.

	(Instructions on ba	ack of application)	□ 1	71
1.	The name of the limited liability co	ompany is:		
	Deer Meadows Subdivision, L.L.	.C.		N TO
2.	The street address of the initial registered office is:			m
	453 Russet Street, Twin Falls, Idaho 83301			_
	and the name of the initial registered agent at the above address is:			
	David M. Shotwell			
3.	The mailing address for future correspondence is:			
	P.O. Box 636, Twin Falls, Idaho 83301			
4.	Management of the limited liability company will be vested in:			
	Manager(s) ☐ or Member(s) ✓ (please check the appropriate box)			
	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.			
	Name	Address	•	
	David M. Shotwell P.O. Box 636, Twin Falls, Idaho 83303			
				-
				-
		——————————————————————————————————————		
				_
				<u>-</u>
				_
	7			-
		ponsible for forming the limited lia	bility company:	-
S	ignature: Varre W	shell	bility company:	-
S		shell		-
S T C	ignature: <u>Vavr</u> W W yped Name: <u>David M. Shotwell</u> apacity: <u>Managing Member</u>	shell	of State use only	-
S T C S	ignature: <u>Vavr</u> W W yped Name: <u>David M. Shotwell</u> apacity: <u>Managing Member</u>	Secretary  Secretary  M.L. Chomstartsolongarization pos 2  M.L. Chomstartsolongarization pos 2  M.L. Chomstartsolongarization pos 3  M.L. Chomstartsolongarization pos 4  M.L. Chomstartsolongarizat	of State use only	TATE 5:00