## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 (23-4 (1) 1:15

	·		•	The second second second
1.	The name of the limited liability com	npany is:		STATE OF IDAHO
Downs Investments LLC				
2.	The complete street and mailing add 15344 Cupid Dr.  (Street Address) Caldwell, ID 83607  (Mailing Address, if different than street address)	Iresses of th	e initial designated/p	orincipal office:
3.	The name and complete street address of the registered agent:			
	Larry Downs (Name)	15344 Cupid Dr., Caldwell, ID. 83607 (Street Address)		
4.	The name and address of at least one member or manager of the limited liability company:			
	Name			
	Debi Downs	15344 Cupid Dr., Caldwell, ID, 8360 15344 Cupid Dr., Caldwell, ID, 8360		<del></del>
	Larry Downs			,
5.	Mailing address for future correspond	dence (annu	al report notices):	
Sig	Future effective date of filing (options nature of a manager, member or son.			·
P-01.			Secretary of	f State use only
Sig	nature Y			
Тур	ped Name: <u>Larry Downs</u>	***************************************	IDAHO: ゼンノゼ4 CX: 7346 C	SECRETARY OF STATE /2011
Sig	nature Kubi Klum		1 6 100.00 -	· O ~ O
Тур	ed Name: Debi Downs		$\omega \ell$	30250