

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 AUG -3 AM 9:19

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Diamond Jim Properties, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

4015 Tuscany Idaho Falls, ID 83404

(Street Address)

P.O. Box 1526 Idaho Falls, ID 83403

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

R. Jim Ovard

4015 Tuscany Idaho Falls, ID 83404

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

R. Jim Ovard

Address

4015 Tuscany Idaho Falls, ID 83404

5. Mailing address for future correspondence (annual report notices):

P. O. Box 1526 Idaho Falls, ID 83403

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: _____

R. Jim Ovard

Signature _____

Typed Name: _____

 Secretary of State use only
 LLCForm501LLC Form 501 LLC Form 501
 Revised 07/2008

 IDAHO SECRETARY OF STATE
 08/03/2009 05:00
 CK: 2663 CT: 239333 BH: 1161243
 1 + 100.00 = 100.00 ORGAN LLC # 2

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