



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 MAR -7 AM 9:00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

HIDDEN LEAF 817 E, LLC

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

2518 ALMO AVE BURLEY, IDAHO 83318

(Street Address)

(Mailing Address, if different than street address)

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

BRENT C. SKAGGS

(Name)

2518 ALMO AVE BURLEY, IDAHO 83318

(Street Address)

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

Name

Address

BRENT C. SKAGGS

2518 ALMO AVE BURLEY, IDAHO 83318

HIEDI W. SKAGGS

2518 ALMO AVE BURLEY, IDAHO 83318

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

2518 ALMO AVE BURLEY, IDAHO 83318

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: BRENT C. SKAGGS

Signature

Typed Name: HIEDI W. SKAGGS

Secretary of State use only

IDAHO SECRETARY OF STATE
03/07/2011 05:00
CK: 1208 CI: 246138 DH: 1263009
1 @ 100.00 = 100.00 ORGAN LLC # 2

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