



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2006 APR 17 PM 1:00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

THE GARDENS LIVING CENTER LLC

2. The street address of the initial registered office is:

1135 EAST 9TH STREET, IDAHO FALLS, ID 83404

and the name of the initial registered agent at the above address is:

RANDY ROBINSON

3. The mailing address for future correspondence is:

1135 EAST 9TH STREET, IDAHO FALLS, ID 83404

4. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

5. 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
<u>RANDY ROBINSON</u>	<u>1598 SHADY PINE IDAHO FALLS ID 83404</u>
<u>CLAUDIA ROBINSON</u>	<u>1598 SHADY PINE IDAHO FALLS ID 83404</u>
<u>RANDY BABE ROBINSON</u>	<u>1598 SHADY PINE IDAHO FALLS ID 83404</u>
<u>JOSHUA ROBINSON</u>	<u>1598 SHADY PINE IDAHO FALLS ID 83404</u>
<u>VANESSA ROBINSON</u>	<u>1598 SHADY PINE IDAHO FALLS ID 83404</u>
<u>CLAUDITA ROBINSON</u>	<u>1598 SHADY PINE IDAHO FALLS ID 83404</u>

6. Signature of at least one person responsible for forming the limited liability company:

Signature: *Randy Robinson*

Typed Name: RANDY ROBINSON

Capacity: MANAGING MEMBER

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

9. Incorporation forms LLC forms starts organization 065
Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE C#
04/17/2006 05:00
CK: 20732 CT: 170262 BH: 949712
1 @ 100.00 = 100.00 ORGAN LLC # 2

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