

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 NOV -7 AM 8-52

(Instructions on back of		of application		
1. The name o	f the limited liability con	npany is:	SECRETARY OF STATE STATE OF IDAHO	
	entals #2, LLC	iipariy io.	OTHE OF IDANO	
•	•	dresses of the	initial designated office:	
(Street Address)				
(Mailing Address	s, if different than street address)	<u></u>		
3. The name a	nd complete street addr	ress of the reg	pistered agent:	
Charles E. M	liller	14259 North (Cleveland Road Preston, ID 83263	
(Name)		(Street Address)		
Charles E Miller		14259 North Cleveland Road Preston, ID 83263		
-	ess for future correspor	ndence (annua	al report notices):	
14259 North	Cleveland Road Preston,	ID 83263		
6 Future offec	tive date of filing (option	nal)·		
J. 1 GIGIO (1100	are date or ming (option			
-	manager, member or	authorized		
person.	202		Secretary of State use only	
Signature	la File		11/97/2014 05:00	
Typed Name:	Charles E Miller - Member		CK:2387 CT:256818 BH:144 16 100.00 = 100.00 ORGAN 1	

Signature _____

Typed Name: _____