	(Instructions on back of application) 08 OCT 22 AM 8: 51 SECRETARY OF STATE
1.	The name of the limited liability company is: STATE OF IDAHO
2.	<u>TIM ECHERBERGER, Home Inspection, LLC</u> The complete street and mailing addresses of the initial designated/principal office: <u>7035 W. TOMBSTONE ST, RATHORUM, TD, 83858</u> (Street Address)
3.	(Mailing Address, if different than street address) The name and complete street address of the registered agent:
	(Name) (Street Address)
<b>4</b> .	The name and address of at least one member or manager of the limited liability company:
	Name <u>Address</u> JAMES ECHEL BERLEL 2035 W. TOMBSTONEST., RATHDRUM, F. S385
5.	Mailing address for future correspondence (annual report notices):
6.	Future effective date of filing (optional):
•	nature of organizer(s). (An organizer is a member, or is ng in behalf of a member or members).
Sig Typ	nature <u>from J. Echelling</u> Ded Name: <u>IAMES J-ECHELBERGER</u>
-	nature IDAHD SECRETARY OF ST
	CK: 5476 CT: 230781 BH: 1 @ 160.00 = 160.00 GRGA