



# **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE**

(Instructions on back of application)

**2015 MAR -2 AM 9:25**

**SECRETARY OF STATE  
STATE OF IDAHO**

1. The name of the limited liability company is:

Cimarron 1D, LLC

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

101 Clover Circle, Hailey, Idaho 83333

(Street Address)

PO Box 1226, Sun Valley, Idaho 83353

(Mailing Address, if different than street address)

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

Kyle Kunz

(Name)

101 Clover Circle, Hailey, Idaho 83333

(Street Address)

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

**Name**

**Address**

Kyle Kunz

101 Clover Circle, Hailey, Idaho 83333

Shari Kunz

101 Clover Circle, Hailey, Idaho 83333

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

PO Box 1226, Sun Valley, Idaho 83353

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Kyle Kunz

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

**03/02/2015 05:00**

**CK:5911 CT:185097 BH:1464051**

**1@ 100.00 = 100.00 ORGAN LLC #2**

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