

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 DEC 15 PM 1:25

SECRETARY OF STATE STATE OF IDAHO

The name of the limited i	lability company is.		JIMIL UF I	NAUA
_	Stonehedge Loc	p, L.L.C.		
The complete street and r	mailing addresses of	the initial des	signated/principal of	fice:
•	5 Main Avenue West, Twi			
(Street Address)				
(Mailing Address, if different than str	reet address)			 i -
The name and complete s	street address of the	registered ag	jent:	
•				
Janet Gorringe		125 Main Ave. W., Twin Falls, ID 83301		
(Name)	(Street Addr	ress)		
The name and address of company:	f at least one membe	er or manage	of the limited liabilit	у
Name		Address		
Janet Gorringe	1:	125 Main Ave. W., Twin Falls, ID 83301		
	· · · · · · · · · · · · · · · · · · ·			
				<u> </u>
				a)
·.			* * * * * * * * * * * * * * * * * * * *	
Mailing address for future				_
	125 Main Ave. W., Twi	n Fails, ID 8331	8	
			. •	***
Future effective date of fi	ling (optional):	· · · · · · · · · · · · · · · · · · ·		
\mathcal{M}				
hature of organizer(\$) (An		is		
ng in behalf of a member or me	mbers).	,	Secretary of State use only	y
name de la		E. P. M.	t with the second second	
nature vane	et Gorringe	<u> </u>		
eu ivaille.		Maskoeri 08	Their Aparton	nu no aces
nature V		formstreet org. ht. PMD evised 07/2008	12/15/200	8 05:
nature		ommett	CK: 8483 CT: 2322 1 0 190.00 = 190.0	36 BH: 1141 86 ORGAN LI
ned Name		. S. D		

4079909