STATE OF IDAHU



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on back		2015 MAR 23 AM 9: 14
1.	The name of the limited liability cor	mpany is:	
	River Valley Home Inspections, LLC		
2.	The complete street and mailing ad 310 West Center Street, Blackfoot, ID 83 (Street Address)		ial designated office:
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Casey Monson	310 West Center S	treet, Blackfoot, ID 83221
	(Name)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		<u>Address</u>
	Casey Monson	310 West Center S	treet, Blackfoot, ID 83221
5. I	Mailing address for future correspor	, ,	port notices):
6. i	Future effective date of filing (option	nal):	
Sign pers	ature of a manager, member or	authorized	
•		: !	Secretary of State use only
Sign Type	ature <u>Casey Monson</u>		IDAHO SECRETARY OF STATE 03/23/2015 05:00 CK:2568 CT:226808 BH:146732 16 100.00 = 100.00 DRGAN LLC
Sign	ature		1@ 20.00 = 20.00 EXPEDITE C
	od Name:		

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