

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 08 0CT 23 AM 8: 54

(Instructions on back of application)

SECRETARY OF STATE

<ol> <li>The name of the limited liability company</li> </ol>	is:
	pperties, LLC
2. The complete street and mailing addresse	es of the initial designated/principal office:
1216 Idaho Street, Lewisto	on, ID 83501
(Sueet Address)	n, ID 83501
(Malling Address, if different than street address)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3. The name and complete street address of	the registered agent:
Jeff Uptmor	1216 Idaho Street, Lewiston, ID 83501
(Name) (Street	t Address)
<ol><li>The name and address of at least one mer company:</li></ol>	mber or manager of the limited liability
Name	Address
Jeff Uptmor	1216 Idaho Street, Lewiston, ID 83501
5. Mailing address for future correspondence	
and and and and are contespondence	(annual report notices):
P.O. Box 1302, Le	wiston, ID 83501
6. Future effective date of filing (optional):	
Signature of organizer(s). (An organizer is a member,	or ie
acting in behalf of a member or members).	0118
Signature July Legy	Secretary of State use only
Typed Name: Jeff Uptmor, Member	_ dd
Typed (Vallie: Self Optilior, Member	-   불
Signature	IDAHO SECRETARY OF STATE  10/23/2008 05:00  CK: 717 CT: 188819 BH: 1141385  1 8 186.86 = 186.86 ORGAN LICE
Typed Name:	198 IDAHO SECRETARY OF STATE 19/23/2008 05:00
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