



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 AUG 24 AM 9:19

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

LK 12, LLC

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

12594 W Explorer Dr Suite 100 Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Tom Buuck

(Name)

12594 W Explorer Dr Suite 100 Boise, ID 83713

(Street Address)

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

**Name**

**Address**

Mountain West IRA, Inc.

10096 West Fairview Avenue Boise, ID 83704

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

12594 W Explorer Dr Suite 100 Boise, ID 83713

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Tom Buuck

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
08/24/2012 05:00  
CK: 1485 CT: 273628 BH: 1337258  
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