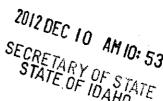


## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY



	(Instructions on bac	ck of application)  SECRETARY OF STATE  OPPRINT IS:
1.	The name of the limited liability co	ompany is: $1000000000000000000000000000000000000$
	MOON VALLEY ROAD LLC	
2.	The complete street and mailing addresses of the initial designated office:  1859 SOUTH TOPAZ WAY - SUITE 200; MERIDIAN, ID 83642  (Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	COLEMAN HOMES LLC	1859 South Topaz Way #200; Meridian, ID 83642
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	<u>Name</u> COLEMAN HOMES LLC	Address 1859 South Topaz Way #200; Meridian, ID 83642
5.	Mailing address for future correspondence (annual report notices):  1859 SOUTH TOPAZ WAY - SUITE 200; MERIDIAN, ID 83642	
6.	Future effective date of filing (option	onal):
_	nature of a manager, member of son.	or authorized
Sig	nature <u>Reuntzhinge</u> ped Name: <u>Quentin M. Knipe, Organize</u>	Secretary of State use only
Sig	nature	IDAHO SECRETARY OF STATE

CK: 304790 CT: 7012 BH: 1350588 1 8 100.00 = 100.00 ORGAN LLC # 2

Typed Name: