



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 FEB 25 PM 12:17

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Inverness LLC

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

7154 W. State Street Suite 268 Boise, ID 83714

(Street Address)

(Mailing Address, if different than street address)

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

Erin McDonald

(Name)

7154 W. State Street Suite 268 Boise, ID 83714

(Street Address)

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

Name

Address

Erin McDonald

7154 W. State Street Suite 268 Boise, ID 83714

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

7154 W. State Street Suite 268 Boise, ID 83714

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Erin McDonald

Typed Name: Erin McDonald

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/25/2015 05:00

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