<u> FILED</u> EFFECTIVE



## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY = 08 NOV -3 AN IO: 11

(Instructions on back of application)

SECRETARY OF STATE

		1. (	CTATE OF IDAIR
1. The nam	e of the limited liability comp	pany is:	STATE OF IDAHO
	SaveMo	ortgageNow.com LLC	
2. The com principal	plete street address, and ma office:	iling address if differe	ent, of the initial designated/
	9430 Fairview	Avenue, Boise Idaho, 837	04
B. The nam address	e of the commercial registere of the non-commercial regist	ed agent; or the name ered agent:	and complete street
	Kari D. Ward, 1300 A	urtesian Road, Eagle Idah	o, 83616
I. The name company	e and address of at least one	e member or manage	r of the limited liability
, , , , ,	<u>Name</u>	Address	
	Kari Ward	9430 Fairview Avenue, Boise Idaho, 83704	
. Mailing ad	ddress for future corresponde	ence (annual report n	otices):
		Avenue, Boise Idaho, 83	
. Future eff	ective date of filing (optional)	):	
gnature of a is acting in bei members).	n organizer(s). (An organizer is half of a required, and existing, init	a member, ial member	
members).	•	Q.	Secretary of State use only
gnature	$\mathcal{L}$	B	
ped Name:	Karmelia Fredrick, Assistant Sec	retary 5	IDAHO SECRETARY OF STATE
gnature		Cretary  Cre	CX: 209024 CT: 16765 15 19
		Paris Revise	
Typed Name:		Revis	1 @ 20.08 = 20.00 URGA

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