

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE 08 OCT -6 AM 10: 05

SECRETARY OF STATE

1. The name of the limited liability co	mpany is: STATE OF IDAHO
	Garvin Homes L.L.C.
	ddresses of the initial designated/principal office: wstone Ave. Pocatello Id 83201
(Street Address)	newood Chubbuck Id 83202
(Mailing Address, if different than street address)	SWOOD CHARDOLICK IN COZOZ
3. The name and complete street add	lress of the registered agent:
Robert J Garvin	750 Pinewood Chubbuck Id 83202
(Name)	(Street Address)
The name and address of at least company:	one member or manager of the limited liability
Name	Address
Robert J Garvin	750 Pinewood Chubbuck Id 83202
Amber K Garvin	750 Pinewood Chubbuck Id 83202
5. Mailing address for future correspondance 750 Pin	ndence (annual report notices): ewood Chubbuck Id 83202
7.001 111	
6. Future effective date of filing (option	nal):
Signature of organizer(s). (An organizer is a acting in behalf of a member or members).	a member, or is
2/1/	Secretary of State use only
Signature Robert J Garvin	}
Typed Name: Robert J Garvin Signature Amber (Sarvin Amber K Garvin	IDAHO SECRETARY OF STATE 10/06/2008 05:00 CK: 890 CT: 230326 BH: 172077
Typed Hairie.	1 0 100.00 = 100.00 DR: 1138877 1 0 20.00 = 20.00 EXPEDITE C