

Signature

Typed Name

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

2013 OCT LO AM 9: 3

SECRETARY OF STATE

(Instr	ructions on back of application)	STATE OF I
The name of the lim	nited liability company is:	
	Magic Valley Rentals, LL	.c
The name of the lim	nited liability company is amended to	o read:
The date the certific	ate of organization was originally file	ed : March 23, 2010
The complete street amended to:	t and mailing addresses of the desig	gnated principal office is
The mailing address	for future correspondence (annual	reports) is amended to:
	ess of the managers/members shall Address	
The name and addre	ess of the managers/members shall	be amended as follows:
The name and addre	ess of the managers/members shall Address	be amended as follows:  Add Delete Other
The name and addre Name Bryan Kolar	ess of the managers/members shall <u>Address</u> 2191 N. Ricke Lane, Flagstaff, AZ	be amended as follows:  Add Delete Other
The name and address Name  Bryan Kolar  Michelle Carpenter	ess of the managers/members shall <u>Address</u> 2191 N. Ricke Lane, Flagstaff, AZ 1407 Maple Ave, T.F., ID 83301 1407 Maple Ave, T.F., ID 83301	be amended as follows:  Add Delete Other

IDAHO SECRETARY OF STATE

10/10/2013 05:00

CK: 5893 CT: 288437 BH: 1393533

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