



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 MAY 23 AM 11:23

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Cochran Realty, LLC

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

647 Filer Avenue, Suite 101, Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Aleesha Cochran

(Name)

647 Filer Avenue, Suite 101, Twin Falls, ID 83301

(Street Address)

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

Name

Address

Aleesha Cochran

647 Filer Avenue, Suite 101, Twin Falls, ID 83301

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

647 Filer Avenue, Suite 101, Twin Falls, ID 83301

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Aleesha Cochran

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/23/2014 05:00

CK:1915198 CT:172099 BH:1426085

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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