



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 APR 15 AM 8:57

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TRI Property LLC

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

946 S. 50 W.

(Street Address)

(Mailing Address, if different than street address)

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

Rita Allred

(Name)

946 S. 50 W. Burley ID

(Street Address)

83318

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

Rita Allred

Name

946 S. 50 W. Burley ID

Address

83318

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

946 S. 50 W. Burley ID 83318

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 Rita Allred

Typed Name: Rita Allred

Signature _____

Typed Name: _____

Secretary of State use only

g:\corporate\LLC forms\secret_org_llc.PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
04/15/2010 05:00
CK: 7111 CT: 247063 BH: 1217009
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