

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 APR 30 AM 8: 37

(motidotions o	in back or application)	050-	
1. The name of the limited liabi	lity company is:	SECRETARY OF STATE STATE OF IDAHO	
Hauser Lake House LLC			
2. The complete street and mail	ing addresses of the initia	al designated office:	
11714 N Hauser Lake Rd, Hause	r ID 83854	_	
(Street Address)			
5808 Summitview Ave, Ste A PM (Mailing Address, if different than street a			
· -	·		
The name and complete stre	et address of the register	ed agent:	
Mara Sargent	11714 N Hauser Lake Rd, Hauser ID 83854		
(Name)	(Street Address)		
company: <u>Name</u>		Address	
<u>мале</u> Mara Sargent	11714 N Hangar I a	11714 N Hauser Lake Rd, Hauser ID 83854	
p-			
P. Martton and done - Co. C.A.		and matina all	
5. Mailing address for future con	•	on notices):	
11714 N Hauser Lake Rd, Hause	r ID 63654		
6. Future effective date of filing	(antional):		
o. Future enective date or limity	(optional).		
N	h		
Signature of a manager, mem person	per or authorized		
M /		Secretary of State use only	
Signature H WA Di	gut !	IDAHO SECRETARY OF STATE	
yped Name: Mara Sargent		04/30/2015 05:00	
		- Project Andrew Cross Control Control Control	

CK:1614 CT:309651 BH:1473367 16 20.00 = 20.00 EXPEDITE C #3

W150968

Signature

Typed Name: ______