



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2009 JAN 14 AM 8:22

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

New West, LLC

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

4000 North Cecina Pl., Meridian, ID 83646

(Street Address)

(Mailing Address, if different than street address)

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

Sharon West

(Name)

4000 North Cecina Pl., Meridian, ID 83646

(Street Address)

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

Name

Sharon West

Address

4000 North Cecina Pl., Meridian ID 83646

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

Sharon West, New West LLC, 4000 N. Cecina Pl, Meridian ID 83646

6. Future effective date of filing (optional): Upon receipt of form

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

Signature Sharon West

Typed Name: Sharon West

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

grcopformsLLC formatcert\_org\_llc.PMD  
Revised 07/2008

IDAHO SECRETARY OF STATE  
01/14/2009 05:00  
CK: 3781 CT: 233113 BH: 1152362  
1 @ 100.00 = 100.00 ORGAN LLC # 2

W80529