



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2013 DEC -5 AM 9:24

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

17th Ave Apartments LLC

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

223 Preston Drive, Lewiston, Idaho 83501

(Street Address)

(Mailing Address, if different than street address)

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

Elizabeth Rawson

(Name)

223 Preston Drive, Lewiston, Idaho 83501

(Street Address)

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

**Name**

**Address**

Elizabeth Rawson

223 Preston Drive, Lewiston, Idaho 83501

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

223 Preston Drive, Lewiston, Idaho 83501

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Elizabeth Rawson

Typed Name: Elizabeth Rawson

Signature \_\_\_\_\_

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

Secretary of State use only

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12/05/2013 05:00  
CK: 9918 CT: 9686 BN: 1400537  
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