

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	LIMITED LIADILI	TI COMPANIA
	(Instructions on bac	k of application)
1.	The name of the limited liability co	mpany is:
	TI	ne Grotto Group, LLC
2.	The complete street and mailing addresses of the initial designated office:	
	5329 N. Toscana Ave. Meridian, ID 8364	46
	(Street Address) 5329 N. Toscana Ave. Meridian, ID 8364	16
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Bill Re	5329 N. Toscana Ave. Meridian, ID 83646
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	<u>Name</u>	<u>Address</u>
	Brian Doke	2310 E. Comisky St. Meridian, ID 83646
	Bill Re	5329 N. Toscana Ave. Meridian, ID 83646
	Denver Barfuss	10885 W. Hiddenbrook Dr. Star, ID 83669
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_		and an an (constant patient)
5.	Mailing address for future correspondence (annual report notices):	
	5329 N. Toscana Ave. Meridian, ID 83646	
•	Future effective date of filing (option	nal).
•	, ata, o one out o date of ming (optio	
ia:	nature of a manager, member o	r authorized
_	son.	
	- A	Secretary of State use only
_	nature W	
уp	ed Name: Brian Doke	
iaı	nature	

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