

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY DEC 24 AM 9: 08

FILED

(Instructions on back of application)

1. The name of the lim	, , ,	is: SEULL STATE
Sage Pointe Properties	i, LLC	
<ol><li>The complete street</li><li>301 Scott Ave. Suite 2;</li></ol>		s of the initial designated office:
(Street Address)		
(Mailing Address, if different	than street address)	We
3. The name and comp	lete street address of	the registered agent:
Daniel Moss	390 N	orth 925 East; Declo, ID 83323
(Name)	(Street	Address)
The name and address company:	ess of at least one mer	mber or manager of the limited liability
Nam.		Address
Moss Family Investmen	11S, LLLP 301 S	cott Ave. Suite 2; Rupert, ID 83350
	-	
5. Mailing address for f		(annual report notices):
301 Scott Ave. Suite 2;	Rupert, ID 83350	
6. Future effective date	of filing (optional): 1/1	/2013
Signature of a manage	er, member or autho	rized
person.	Λ	Secretary of State use only
Signature	2 Miss	
Typed Name: Daniel Mos	s - authorized agent	
		IDAHO SECRETARY OF STATE
Signature	-	CK: 2115A CT: 23198A 99, 1252250
Typed Name:		1 @ 100.00 = 100.00 DKGAN LLC # 8

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