

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 DEC 20 PM 1: 06

1.	The name of the limited liability cor	mpany is:	State of Land
	GLAD LLC		
2.	The complete street and mailing addresses of the initial designated office: 490 Memorial Drive, Second Floor, Idaho Falls, Idaho 83402		
	(Street Address)		
	PO Box 51630, Idaho Falls, Idaho 83405		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Steven R. Parry	490 Memorial Drive, Second	l Floor, Idaho Falls, Idaho
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name		ress
	John D. Parry, trustee of The George	2400 East 25th Street, Idaho	Falls, ID 83404
	and Amber Lovell Family Trust		
5.	Mailing address for future correspondence (annual report notices): c/o Steven R. Parry, PO Box 51630, Idaho Falls, Idaho 83405		
6.	Future effective date of filing (option	nal):	
_	nature of a manager, member or son.		
	Steam Kl	\$	Secretary of State use only
_	nature Count Jauny		
Тур	ped Name: Steven R. Parry, Organizer/A	gent	
Sia	nature		IDAHO SECRETARY OF STATE
•			CK: 58495 CT: 2834 BH: 1482667
יאָרי	ped Name:		8 100.00 = 100.00 UKGAN LLC # 2 B 20.00 = 20.00 EXPEDITE C # 2

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