

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY MILED EFFECTIVE

(Instructions on back of application)

10 JAN 11 PM 3: 19

1.	The name of the limited liability comp	pany is: STATE OF STATE
	Erwin's	's Jerome Acres LLC
2.	•	resses of the initial designated/principal office: Road, Richfield, ID 83349
	(Street Address)	143, Richfield, ID 83349
	(Mailing Address, if different than street address)	143, Richilett, 1D 00049
3.	The name and complete street address of the registered agent:	
	Amber R. Myrick	3101 W. Main, Suite 200, Boise, ID 83702 (Street Address)
٠		(Street Address)
4.	The name and address of at least one company:	e member or manager of the limited liability
	Name	<u>Address</u>
	Rebecca S. Erwin, Manager	PO Box 143, Richfield, ID 83349
5.	Mailing address for future correspond	lence (annual report notices):
J.	•	56, Boise, ID 83707-1156
6.	Future effective date of filing (optional	l):
Sig	nature of organizer(s). (An organizer is a m	nember, or is
acti	ng in behalf of a member or members).	Secretary of State use only
Sig	inature MAS KIMUL	7 and 3
_	ped Name; Amber R. Myrick	~~~ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
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Sig	nature	IDANO SECRETARY OF STATE  ### ### ### ### ####################
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