



# AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$30.00.

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

2018 APR 20 AM 9: 25

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:  
H.C.S. Realty LLC
2. The date the certificate of organization was originally filed : 03/24/2014
3. The name of the limited liability company is amended to:  
Iron Sight Real Estate LLC
4. The complete street and mailing addresses of the principal office is amended to:  
4740 S Silverhills Ave Boise, ID 83709  
(Street Address)  
  
(Mailing Address, if different)
5. The mailing address for future correspondence (annual reports) is amended to:  
1060 W Estate Dr. Boise, ID 83709  
(Address)
6. The name and address of the managers/members shall be amended as follows:
 

|                               |                                  |                    |  |
|-------------------------------|----------------------------------|--------------------|--|
| Add: <input type="checkbox"/> | Delete: <input type="checkbox"/> | Herb Cody Sinclair | 4740 S Silverhills Ave Boise, ID 83709 |
|                               |                                  | (Name)             | (Address)                              |
| <hr/>                         |                                  |                    |  |
| Add: <input type="checkbox"/> | Delete: <input type="checkbox"/> |                    |  |
|                               |                                  | (Name)             | (Address)                              |
| <hr/>                         |                                  |                    |  |
| Add: <input type="checkbox"/> | Delete: <input type="checkbox"/> |                    |  |
|                               |                                  | (Name)             | (Address)                              |
| <hr/>                         |                                  |                    |  |
7. Signature of a manager, member, or authorized person.
 

|   |  |
|---|--|
| Printed Name: Herb Cody Sinclair<br>Signature: <u>Herb Cody Sinclair</u><br>Printed Name: _____<br>Signature: _____ | Secretary of State use only<br>IDAHO SECRETARY OF STATE<br>04/20/2018 05:00<br>CK:1110 CT:356613 BH:1639540<br>1@ 30.00 = 30.00 ORGAN AMEN #2<br><br><div style="font-size: 2em; font-family: cursive;">W 135889</div> |
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