

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.**FILED EFFECTIVE****2016 MAR 29 AM 10:02****SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Twin View, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

627 2nd Ave. South, Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:

Nathan R. Robinson

627 2nd Ave. South, Twin Falls, ID 83301

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

Nathan R. Robinson

627 2nd Ave. South, Twin Falls, ID 83301

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

627 2nd Ave. South, Twin Falls, ID 83301

(Address)

Signature of organizer(s).

Signature: Nathan R. RobinsonPrinted Name: Nathan R. Robinson

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/29/2016 05:00

CK:3727444 CT:172099 BH:1520976

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