

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

11 JAN 10 PM 12: 48

The name of the limited liabil	ity company is: Our Old House	SECRE BY OF STATE STATE OF IDAHO	
The complete street and maili 116 19th. Avenue South Nampa,	•	tial designated/principal office:	
(Street Address)			
(Mailing Address, if different than street ad	ldress)		
The name and complete stree	et address of the registe	ered agent:	
Alfred J. Mengon Jr.	116 19th Avenue	116 19th Avenue South	
(Name)	(Street Address)	(Street Address)	
The name and address of at I company:	east one member or m		
Name	440 40th Avenue	Address	
Alfred J. Mengon Jr.	110 1301 Avenue	116 19th Avenue South	
. Mailing address for future con	respondence (annual re	eport notices):	
116 19th Avenue South Nampa, I	daho 83651-4849		
. Future effective date of filing (	(optional):		
gnature of a manager, memberson.	per or authorized		
		Secretary of State use only	
	on Ir		
ped Name: Alfred J. Mengon JY.			
gnature		IDANO SECRETARY OF STATE @1/11/2011 @5:0 CK: 3381 CT: 254251 BH: 12548	
rped Name:		1 2 188.98 = 199.88 ORGAN LLC	

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