

Printed Name

Signature:

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 DEC -8 AM 8: 59

FILED EFFECTIVE

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

Complete and submit the application in <u>duplicate</u>.

Title 30, Chapters 21 and 25, Idaho Code

SECRETARY OF STATE

W159361

1. The name of the limited liability company is: Elder St LLC

(Street Address)		
Mailing Address, if different)		
The name and complete s	street address of the register	ed agent:
Carole Adams	647 E Ridgesto	ne Dr. Kuna ID 83634
(Name)	(Address)	
The name and address of	at least one governor of the	limited liability company:
Ron Adams	647 E Ridgestone Dr. Kuna ID 83634	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	**************************************
——————————————————————————————————————	correspondence (annual rej (una, ID 83634	port notices):
(Address)		
ature of organizer(s).		Secretary of State use only
ed Name: Carole Adams		IDAHO SECRETARY OF STATE
M		12/08/2015 05:00 CK:106 CT:317663 BH:1503405