



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

FILED EFFECTIVE

10 MAR - 1 AM 9:04

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Casper Property Rentals LLC

2. The complete street and mailing addresses of the initial designated/principal office:

274 W. Trophy St. Kuna, ID 83634

(Street Address)

(Mailing Address, if different than street address)

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

Cameron Casper

(Name)

274 W. Trophy St. Kuna, ID 83634

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Cameron Casper

Name

Address

274 W. Trophy St. Kuna, ID 83634

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

274 W. Trophy St. Kuna, ID 83634

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Cameron Casper

Secretary of State use only

Signature

Typed Name:

W9111