

## **ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY**

	ARTICLES OF ORG		FILED EFFECTIVE
# 01 Kg	(Instructions on back o	ofapplication)	A CONTRACTOR OF THE CONTRACTOR
1. The na	ame of the limited liability compa	pany is:	Company Company
<u>Ex</u>	change 04-2379, LLC., an Ida	aho LImited Liability C	11 17 - 18
2. The st	treet address of the initial registe	ered office is:	
195	South Broadway, P.O. Box 58	80, Blackfoot, Idaho 83	3221
and th	e name of the initial registered a	agent at the above addres	s is:
Shau	na Romrell ( )		
3. The m	ailing address for future corresp	oondence is:	
P.0	. Box 580, Blackfoot, Idaho	83221	
4. Mana	gement of the limited liability con	mpany will be vested in:	
·	ger(s) or Member(s) 🗓		,
5. If man addre	agement is to be vested in one of ss(es) or at least one initial manager(s), list the name(s) and addre	or more manager(s), list th ager. If management is to ess(es) of at least one initia	e name(s) and be vested in the al member.
5. If man addres	agement is to be vested in one c ss(es) or at least one initial man	or more manager(s), list th ager. If management is to ess(es) of at least one initia	e name(s) and be vested in the
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5. If man address members	ragement is to be vested in one of ss(es) or at least one initial manager(s), list the name(s) and address Name  CHANGE SERVICES, INC.	or more manager(s), list the lager. If management is to ess(es) of at least one initians.  A  P.O. Box 580, Black	e name(s) and be vested in the al member.  ddress  afoot, Idaho 83221
5. If man address member    EXCO	ture of at least one person responses.	P.O. Box 580, Black	e name(s) and be vested in the al member.  ddress  afoot, Idaho 83221  ded liability company:
5. If man address member    EXCO	ture of at least one person responses.	P.0. Box 580, Black	e name(s) and be vested in the al member.  ddress  afoot, Idaho 83221
5. If man address member 5. Exception 1. Signatus Typed I	nagement is to be vested in one of ss(es) or at least one initial manager(s), list the name(s) and address Name  Name  CHANGE SERVICES, INC.	P.0. Box 580, Black	e name(s) and be vested in the al member.  ddress  afoot, Idaho 83221  ded liability company:
5. If man address member 5. Exconomics 5. Signatus 7. Typed I Capaci	ture of at least one person response:  SHANGE SERVICES, INC.  SHAUNA ROMRELL  ty:  PRESIDENT	P.0. Box 580, Black	e name(s) and be vested in the al member.  ddress  afoot, Idaho 83221  ded liability company:
5. If man address members with the second se	ture of at least one person response:  SHANGE SERVICES, INC.  SHAUNA ROMRELL  ty:  PRESIDENT	P.O. Box 580, Black	e name(s) and be vested in the al member.  ddress  afoot, Idaho 83221  ted liability company: