

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 08 SEP 15 PM 1: 22

(Instructions	secretary of STATE
1. The name of the limited liab	SECRETARY IDAHO STATE OF IDAHO
	• • •
Hagerman Thrift St	
	iling addresses of the initial designated/principal office:
2650 South 1006 Ea	st; Hagerman ID 83332
(Street Address) PO Box 491; Hagerm	an ID 83332
(Mailing Address, if different than street	address)
<ol><li>The name and complete street</li></ol>	eet address of the registered agent:
Louis Koopman	2650 South 1006 East Hagerman ID 83332
(Name)	(Street Address)
company:	t least one member or manager of the limited liability
<u>Name</u>	Address
Louis Koopman	PO Box 491; Hagerman ID 83332
	•
5. Mailing address for future o	orrespondence (annual report notices):
PO Box 491; Hagerma	an ID 83332
6. Future effective date of filing	g (optional):
•	
Signature of organizer(s). (An org	janizer is a member, or is
acting in behalf of a member or member	pers).
JI WALL	Secretary of State use only
Signature	
Typed Name\/ <u>Louis<sup>U</sup>k/oopma</u>	an g
	IDAHO SECRETARY OF STATE  99/15/2008 05:0
Signature	105 av 344 AT AGEAN DUN 117599
Typed Name:	Revis

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