## FILED CLES OF ORGANIZATION LIMITED LIABILITY COMPANY

98 DEC -3 AM 8: 45
(Instructions on back of application)
SECRETARY OF STATE
STATE OF IDAHO



1.	Ine name of the limited liability company is:	
2.	The address of the initial registered office is:	2251 N. Holmes, Idaho Falls, ID 83401 (not a PO Box)
	agent at that address is: Hal Wright  Signature of registered agent:	and the name of the initial registered
3.	The latest date certain on which the limited lia	ability company will dissolve:12/31/2050
4.	Is management of the limited liability company vested in a manager or managers?  Yes  No (check appropriate box)	
5.	If management is vested in one or more manager(s), list the name(s) and address(es) of a least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.  Name:  Address:	
	<del></del>	Address:
	Alan Wright 1	426 Mojave, Idaho Falls, ID 83404
	Hal Wright 7	45 Truex Ct., Idaho Falls, ID 83404
	Corey Shaw 2	133 Wahlquist, Idaho Falls, ID 83401
6.	Signature of at least one person listed in #5 at Alan Wright  Hal Wright  Corey Shaw	INCHO SECRETARY OF STATE  12 > 65 9 9 1 9 9 9 1 9 9 9 1 9 9 9 1 9 9 9 1 9 9 9 1 9 9 9 1 9