

**FILED EFFECTIVE**

# **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2014 JAN 30 AM 9:13

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

C-STORE EXPRESS, LLC

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

2785 SUNCREST CIRCLE

(Street Address)

TWIN FALLS, ID 83301

(Mailing Address, if different than street address)

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

JAMES R. LASH

(Name)

2785 SUNCREST CIRCLE, TWIN FALLS, ID 83301

(Street Address)

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

**Name****Address**JAMES R. LASH2785 SUNCREST CIRCLE, TWIN FALLS, ID 83301

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

2785 SUNCREST CIRCLE, TWIN FALLS, ID 83301

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature \_\_\_\_\_

Typed Name: JAMES R. LASH

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

 IDAHO SECRETARY OF STATE  
 01/30/2014 05:00  
 CK: MO CK # CT: 292394 BH: 1408391  
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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