

LIMITED LIABILITY COMPANY FILED EFFECTIVE **ARTICLES OF ORGANIZATION**

(Instructions on back of application)

2003 DEC 30 AM 8: 27

1.	The name of the limited liability comp	•	STATE OF IDAHO
2.	The street address of the initial register 1200west 57 south Blackfoot, I	ered office is:	
	and the name of the initial registered a	agent at the above add	dress is:
3.	The mailing address for future correspondence is:		
	1095 west 100south disakfoot, Jd. 857.1		
4. Management of the limited liability company will be vested in:			ո:
	Manager(s) X or Member(s)	(please check the appropri	ate box)
5.	f management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the nember(s), list the name(s) and address(es) of at least one initial member.		
	Name		Address
	Sandra Empey	1095 w. 100s.	Blackfoot, Id. 83221
	Peggy Lawver		Blackfoot, Id. 83221
			MARK .
6.	Signature of apleast one person respo	onsible for forming the	limited liability company:
	Signature: Sandra Emper	4	Secretary of State use only
-	Typed Name: Dandra Empey	Sgot look	
	Capacity: Owner/manager	Corpularization p65 Revised 07/2002	
4	Signature VIOV / Jau		
	Typed Name: Feggy Lawver	Revised 0772002	IDAHO SECRETARY OF STATE

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