		FILED EFFE	GIVE
	CERTIFICATE OF	ORGANIZATION	
	LIMITED LIABILI	TY COMPANY ZOIL MAY 16 PH	2.11
Chi to to	(Instructions on back		
1	The name of the limited liability con		
		ind Sons Enterprises LLC.	
2. 1		dresses of the initial designated/principal	office:
	(Street Address) PO. Box 176 Iona, Idaho 83427 (Mailing Address, if different than street address)		
3. T	he name and complete street addr	ess of the registered agent:	
		cas of the registered agent.	
	Micheal J. Whyte (Name)	2635 Channing Way Idaho Falls, Idaho 83404 (Street Address)	
C	ompany: <u>Name</u> Craig Barber	ne member or manager of the limited liabi <u>Address</u> 2973 N. Wildflower Dr. Idaho Falls, Idaho 83401	
-	Cheryl Barber		
-		2973 N. Wildflower Dr. Idaho Falls, Idaho 83401	
-			
-			
-			
	ailing address for future correspond PO Box 176 Iona, Idaho 83427	dence (annual report notices):	
-	•		
<u>-</u> B. Fi Signa	PO Box 176 Iona, Idaho 83427 uture effective date of filing (optiona iture of a manager, member or a	NI):	
igna igna erso	PO Box 176 Iona, Idaho 83427 uture effective date of filing (optiona iture of a manager, member or a n.	NI):	
igna igna igna	PO Box 176 Iona, Idaho 83427 uture effective date of filing (optiona uture of a manager, member or a n.	authorized	
6. Fi Signa Jerso Signa	PO Box 176 Iona, Idaho 83427 uture effective date of filing (optiona ture of a manager, member or a n. ture <u>Craig Barber</u>	authorized	
igna igna igna igna	PO Box 176 Iona, Idaho 83427 uture effective date of filing (optiona ture of a manager, member or a n. ture <u>Craig Barber</u>	authorized	
igna igna igna igna	PO Box 176 Iona, Idaho 83427 uture effective date of filing (optional iture of a manager, member or a n. ture Craig Barber ture Ching Barber ture Ching Barber I Name: Cheryl Barber	II):	