



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 APR 10 PM 2:51

SECRETARY OF STATE STATE OF IDAHO

1.	. The name of the limited liability company is:		
	В	N B Family LLC	
2.	The complete street and mailing add 4286 E Amity suite 103 Nam pa I	resses of the initial designated office:	
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Timothy D Bassett (Name)	1524 E York Ave, Nampa, Idaho 83686 (Street Address)	
	4. The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	<u>Address</u>	
	Timothy D Bassett	1524 E York Ave, Nampa, Idaho 83686	
	Jennifer E. Black	649 W. OAK Crost Dr. Monticello, ht	
5. 1	Mailing address for future correspond	dence (annual report notices):	
	1524 E York Ave, Nampa, Idaho 83686		
6. I	6. Future effective date of filing (optional):		
Signature of a manager, member or authorized person. Secretary of State use only			
Sign	ature () Bry Ma		
_	ed Name. Timothy D. Bassett		
Sign	ature	IDAHO SECRETARY OF STATE	
Typed Name:		CK: 1127 CT: 249489 BH: 1319171	

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