



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY OF MAY 21 AM 9: 09

(Instructions on back of application)

SECRETARY OF STATE

The complete street and mailing ad	Idresses of the initial designated/principal office:
•	derson Ln Pocatello id 83202
(Street Address)	
(Mailing Address, if different than street address)	
The name and complete street add	ress of the registered agent:
51 (51)	4000 Hambaran In Baset-Na Id 0000
Robert P McClung (Name)	4080 Henderson Ln Pocatello Id 83202 (Street Address)
The name and address of at least of	one member or manager of the limited liability
company:	
Name Robert P McClung	Address 4080 Henderson Ln Pocatello Id 83202
Lilli M McClung	4080 Henderson Ln Pocatello Id 83202
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•	ndence (annual report notices): hubbuck Rd Pocatello Id 83202
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