



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 APR -1 AM 8:39

1. The name of the limited liability company is:

LARSON ENTERPRISES, L.L.C.

SECRETARY OF STATE  
STATE OF IDAHO

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

45 W. 100 N., BLACKFOOT, IDAHO 83221

(Street Address)

SAME AS ABOVE

(Mailing Address, if different than street address)

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

E. DARLENE LARSON

(Name)

45 W. 100 N., BLACKFOOT, IDAHO 83221

(Street Address)

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

Name

Address

E. DARLENE LARSON

45 W. 100 N., BLACKFOOT, IDAHO 83221

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

45 W. 100 N., BLACKFOOT, IDAHO 83221

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature E. Darlene Larson

Typed Name: E. DARLENE LARSON

Signature \_\_\_\_\_

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

Secretary of State use only

IDAHO SECRETARY OF STATE

04/01/2011 05:00

CK: 3384 CT: 257259 BH: 1267205

1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

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