

FILED EFFECTIVE

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

APR -4 AM 8:43

STATE OF IDAHO

(Instructions on back of application)



1. The name of the limited liability company is: SHERFA, L.L.C.

2. The address of the initial registered office is: 236 South 2nd East, Rexburg, ID 83440
(not a PO Box)

_____ and the name of the initial registered agent at that address is: Sherri Fullmer

Signature of registered agent: _____

3. The latest date certain on which the limited liability company will dissolve: 12/31/2040

4. Is management of the limited liability company vested in a manager or managers?
☐ Yes ☒ No (check appropriate box)

5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

Name:

Address:

Sherri Fullmer

236 South 2nd East, Rexburg, ID 83440

Nyle Fullmer

236 South 2nd East, Rexburg, ID 83440

6. Signature of at least one person listed in #5 above:

Sherri Fullmer

IDAHO SECRETARY OF STATE

04/04/2001 09:00
CK: 2344 CT: 67111 BH: 308997

1 @ 100.00 = 100.00 ORGAN LLC # 3

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