

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 APR 14 AM 8: 45

The complete street and mailing addresses		
1810 R Street Heyburn ID 83336	s of the initial o	designated/principal office:
(Street Address)	<u>-</u>	
(Mailing Address, if different than street address)	RLEY ID 83318	3
The name and complete street address of	the registered	agent:
Stegen Phillips	1810 R Street Heyburn, ID 83336	
	t Address)	
The name and address of at least one mer	mber or manag	jer of the limited liability
company:		Address
Name Jonathan Loper	204 South 250 East Burley, ID 83316	
	20-r 30util 20	v Last Dulley, ID 93319
Stegen Phillips	1810 R Stre	eet Heyburn, ID 83336
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Mailing address for future correspondence	· (annuaι report łeybum, ID 83336	and the second s
T Jeello A ULOI	eypuili, ID 03330	
Future offective date of filing (entires).		
Future effective date of filing (optional):		
rature of organizer(s). (An organizer is a membe	er, or is	
g in behalf of a member or members).	c	Secretary of State use only
pature war	tc.PME	
ed Name: Jonathan Loper	Coert ong Re PMD	
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