

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

		ckofapplication) 2005 APR 11 Att 9: 59
	(Instructions on bac	0400
•	The name of the limited liability con	npany is:
	AB First Aid Store, L.L.C.	
2.	The street address of the initial regis	stered office is:
	7701 Mossy Cup Boise, Idaho	83709
	and the name of the initial registered	d agent at the above address is:
	John C. Fogg Sr.	
3.	The mailing address for future corre	spondence is:
	PO Box 190480 Boise, Idaho	83719-0480
<b>1</b> .	Management of the limited liability of	ompany will be vested in:
		_
<b>&gt;</b> .	address(es) of at least one initial ma	(please check the appropriate box) e or more manager(s), list the name(s) and anager. If management is to be vested in the
5.	If management is to be vested in one address(es) of at least one initial ma	e or more manager(s), list the name(s) and anager. If management is to be vested in the dress(es) of at least one initial member.
<b>.</b>	If management is to be vested in one address(es) of at least one initial mamember(s), list the name(s) and add	e or more manager(s), list the name(s) and anager. If management is to be vested in the dress(es) of at least one initial member.  Address
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-	If management is to be vested in one address(es) of at least one initial mamember(s), list the name(s) and add Name  John C. Fogg Sr.	e or more manager(s), list the name(s) and anager. If management is to be vested in the dress(es) of at least one initial member.  Address  3985 Summerset Way Boise, Idaho 83709  Donsible for forming the limited liability company:
S	If management is to be vested in one address(es) of at least one initial mamember(s), list the name(s) and add Name  John C. Fogg Sr.  Signature of at least one person response.	e or more manager(s), list the name(s) and anager. If management is to be vested in the dress(es) of at least one initial member.  Address  3985 Summerset Way Boise, Idaho 83709

Signature: Typed Name: John C. Fogg Sr. Capacity: Owner/Manager Signature \_\_\_\_ Typed Name: Capacity: \_\_

IDAHO SECRETARY OF STATE

94/11/2005 05:00

CK: 6954 CT: 187718 BH: 803795
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