



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY **FILED/EFFECTIVE**

(Instructions on back of application)

01/30/2003 11:09:09

SECRETARY OF STATE
STATE OF IDAHO

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

2. The address of the initial registered office is: 129 N. 1200 W. Blackfoot, ID 83221

_____ and the name of the initial registered agent at that address is: Connie Christensen

Signature of registered agent: _____

3. Management of the limited liability company will be vested in:

Manager(s) or Member(s) . (please check the appropriate box)

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

<u>Name</u>	<u>Address</u>
<u>Connie Christensen</u>	<u>129 N. 1200 W. Blackfoot, ID 83221</u>
_____	_____
_____	_____
_____	_____
_____	_____

5. Signature of at least one person responsible for forming the limited liability company:

Connie Christensen

Secretary of State use only

g:\corpforms\LLC1.p05 Revised 2/00

IDAHO SECRETARY OF STATE
01/30/2003 05:00
CK: 53939 CT: 130174 BH: 659938
1 @ 100.00 = 100.00 ORGAN LLC # 2

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