			CLES C TED LIA				-	2003 DEC -3	AM 8
157	OF	(nstructions	s on back o	ofapplicatio	on)		STATE OF I	
1.	The nan	ne of the	limited liabi	ility comp	any is:			UTATE OF IL	DAHO
	AJ and	Kathryr	, LLC						
2.	The stre	et addre	ss of the init	tial registe	ered office i	s:			
	774 Pa	almetto D	r.						
			the initial re	gistered a	agent at the	above a	ddress is	S:	
	Marta	Miller							<u> </u>
3.	The mai	ling addr	ess for futur	re corresp	ondenceis	5:			
	774 Pa	aimetto E	r. Eagle IC	0 83616					
4.	Manage	ementoft	he limited li	ability cor	npany will b	be vested	l in:		
	Manage	er(s) 🗸	or Membe	er(s)	(please che	eck the appro	priate box)		
5.	address	(es) of at		nitial man	ager. If mai	nagemer	nt is to be		
5.	address	(es) of al r(s), list th	least one ir ie name(s)	nitial man	ager. If mai ess(es) of a	nagemer it least or	nt is to be ne initial r Addu	vested in the nember. ress	
5.	address	(es) of al r(s), list th	least one ir ie name(s)	nitial man	ager. If mai	nagemer it least or	nt is to be ne initial r Addu	vested in the nember. ress	
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6.	Address member Marta	r(s), list th Miller	least one ir ne name(s) Name	nitial man and addre	ager. If mai ess(es) of a 774 Palm	etto Dr.	nt is to be ne initial r Addu Eagle ID	vested in the nember. ress	······
6.	Address member Marta	re of at le	ast one per	nitial man and addre	ager. If mai ess(es) of a 774 Palm	etto Dr.	nt is to be ne initial r Addu Eagle ID	vested in the member. ress 0 83616	·····
6.	Address member Marta Signature Signature Typed Na	r(s), list th Miller re of at le	least one in ne name(s) Name ast one per My //// rta Miller	nitial man and addre	ager. If mai ess(es) of a 774 Palm	etto Dr.	nt is to be ne initial r Addu Eagle ID	vested in the member. 83616	
6.	Address member Marta Signature Signature Typed Na	re of at le	least one in ne name(s) Name ast one per My //// rta Miller	nitial man and addre	ager. If mai ess(es) of a 774 Palm	etto Dr.	nt is to be ne initial r Addu Eagle ID	vested in the member. 83616	
6.	Address member Marta Signature Signature Typed Na Capacity	r(s), list th Miller re of at le ame: <u>Ma</u> : <u>Preside</u>	least one in ne name(s) Name ast one per My //// rta Miller	nitial man and addre	ager. If mai ess(es) of a 774 Palm	etto Dr.	nt is to be ne initial r Addu Eagle ID	vested in the member. ress 0 83616 liability company stary of State use only IDAHO SECRETAN	Ry of s
6.	Address member Marta Marta Signature Signature Typed Na Capacity Signature Typed Na	r(s), list the Miller	least one in ne name(s) Name ast one personal rta Miller ent	nitial man and addre	ager. If man ess(es) of a 774 Palm	etto Dr.	nt is to be ne initial r Addu Eagle ID	Vested in the member. 1983616 1983616 1000 SECRETAN 12/93/200 CK: 1665 CT: 1433	Ry df 5