

FILED EFFECTIVE

2005 MAY 10 10:10 AM
STATE OF NEW YORK

5. 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 member(s), list the name(s) and address(es) of at least one initial member.

Address

P.O. Box 580, Blackfoot, ID 83221

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IDAHO SECRETARY OF STATE
 05/19/2005 05:00
 CK: 1735 CT: 126476 BH: 811220
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