ARTICL LIMITEL	ES OF ORGAN	IZATION MPANY A	FILED EFFE	CTIVE
(Instr	uctions on back of applic	ation)		
. The name of the limit	ed liability company is:	SEUF ST	RETARY OF STATE	
Kruger Transcriptio				
	f the initial registered offi	ce is:		
	ek Street, Meridian, Idah			
	initial registered agent at		ress is:	
	nitial registered agent at			
Tami L. Kruger		<u></u>	<u>, , , , , , , , , , , , , , , , , , , </u>	
	for future correspondence			
	ek Street, Meridian, Idah		<u></u>	·····
4. Management of the l	imited liability company	will be vested in	:	
	Member(s)	se check the appropria	ate box)	
address(ss) of at los	be vested in one or more ast one initial manager. If name(s) and address(es)	manadementi	initial member.	9
5. If management is to address(es) of at lea member(s), list the n	be vested in one or more ast one initial manager. If name(s) and address(es) ame) of at least one	initial member. Address	
5. If management is to address(es) of at lea member(s), list the n	be vested in one or more ast one initial manager. If name(s) and address(es) ame) of at least one	initial member.	
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5. If management is to address(es) of at lea member(s), list the m Na Tami L. Kruger	be vested in one or more ast one initial manager. If name(s) and address(es) ame 	W. Root Creek	Address	10 83646
 5. If management is to address(es) of at lead member(s), list the moment is to member(s) of at leas 6. Signature of at leas 	be vested in one or more ast one initial manager. If name(s) and address(es) ame	W. Root Creek	Address	no 83646
 5. If management is to address(es) of at lead member(s), list the normalized states and the second states and the second states and the second state and the second stat	be vested in one or more ast one initial manager. If name(s) and address(es) ame 2430 	W. Root Creek	Address Address St., Meridian Idah	no 83646
 5. If management is to address(es) of at lead member(s), list the moment is to member(s) of at leas 6. Signature of at leas 	be vested in one or more ast one initial manager. If name(s) and address(es) ame 2430 	W. Root Creek	Address Address St., Meridian Idah	no 83646
 5. If management is to address(es) of at lear member(s), list the model of at leas <u>Tami L. Kruger</u> 6. Signature of at leas Signature. <u>Typed Name: Tami</u> Capacity: <u>Manager</u> 	be vested in one or more ast one initial manager. If name(s) and address(es) ame 2430 tone person responsible L. Kruger	of at least one W. Root Creek	Address Address St., Meridian Idah	no 83646
 5. If management is to address(es) of at leas member(s), list the model of at leas the formula of a second secon	be vested in one or more ast one initial manager. If name(s) and address(es) ame 2430 tone person responsible L. Kruger	W. Root Creek	Address Address St., Meridian Idah	npany: a only

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