



(Instructions on back of application)

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SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

**Conner Bithell Associates, LLC**

- 2. The street address of the initial registered office is:**

**5901 S Sweet Gum Way**

and the name of the initial registered agent at the above address is:

**Clayton Conner**

- 3. The mailing address for future correspondence is:**

5901 S Sweet Gum Way, Boise, ID 83716

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

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

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.

Name

**Address**

**Clayton Conner**

5901 S Sweet Gum Way, Boise, ID 83716

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

**Signature:**

Typed Name: Clayton Conner

Capacity: Partner

**Signature**

**Typed Name:**

**Capacity:**

**Secretary of State use only**

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IDAHO SECRETARY OF STATE  
09/12/2006 05:00  
CK: 909678 CT: 172099 BH: 974716  
1 @ 100.00 = 100.00 ORGAN LLC # 4

590 Washington Avenue

Revised 07/2002

Web Form