

## ARTICLES OF ORGANIZATION ED EFFECTIVE

(Instructions on back of application)

26% JUN 12 MI 10: 34

1.	The name of the limited liability compa	any is:	SEORE FALL OF STATE STATE OF DICTO	
2.	The street address of the initial registered office is:  423 N. 150 W., Blackfoot, ID 83221			
	and the name of the initial registered agent at the above address is:  Kent Banner			
3.	The mailing address for future correspondence is:  423 N. 150 W., Blackfoot, ID 83221			
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	Add	Iress	
	Kent Banner	423 N. 150 W., Blackfoot, ID 83221		
6	Signature of at least one person responsible for forming the limited liability company:			
	Signature: Kent Banner  Typed Name: Kent Banner		retary of State use only	
	Capacity: Manager	is oforgani	w5/423	
	Signature Typed Name: Capacity:	Morms/LLC	IDANO SECRETARY OF STATE & GO 6/12/2006 05:00 CK: 4825 CT: 281255 BH: 959472 1 8 188.80 = 188.80 ORGAN LLC # 2	