

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE 07.0CT 12 AM 8:53

SECRETARY OF STATE

1.	The name of the limited liability comp	pany is: STATE OF IDAHO
2.	The street address of the initial registered office is: 329 S Woodruff Ave Idaho Falls, ID 83401	
	and the name of the initial registered Kent Oseen	agent at the above address is:
3.	The mailing address for future correspondence is: 329 S Woodruff Ave Idaho Falls, ID 83401	
4.	The limited liability company will be:	
	Manager-managed or Member-managed (please check the appropriate box)	
5.	. If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member. Name Address	
	Kent Oseen	329 S Woodruff Ave Idaho Falls, ID 83401
	Paul Johnson	329 S Woodruff Ave Idaho Falls, ID 83401
	Brent Johnson	329 S Woodruff Ave Idaho Falls, ID 83401
6. Signature of at least one person responsible for forming the limited liability company:		
	Signature: Kent Oseen Kent Oseen	Secretary of State use only
	Capacity: Manager	
	Capacity.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Signature	IDAHO SECRETARY OF STATE 10/12/2007 05:00 75. 200
	Typed Name:	CK: 5080 CT: 192345 BH: 1080239 1 0 100.00 = 100.00 ORGAN LLC # 2
Capacity: Web Form		