	TE OF ORGANI		<u>\</u>
(Instruc	tions on back of applicatio	on)	S.
. The name of the limite	d liability company is:	SECRETARY OF STATE STATE OF IDAHO	7
	Lane Consulting	• · · · ·	•
The complete street ar		ne initial designated/principal office:	-
	1812 S. Florence, Namp		
(Street Address)			•
(Mailing Address, if different that	n street address)	· · · · · · · · · · · · · · · · · · ·	
The name and comple	te street address of the re	egistered agent:	
Adrian B. Lan	9 18	12 S. Florence, Nampa, ID 83686	
(Name)	(Street Address	s)	•
company: <u>Name</u> Adrian B. La	ne 18	Address 112 S. Florence, Nampa, ID 83686	
Name	ne 18		
<u>Name</u> Adrian B. Lar		12 S. Florence, Nampa, ID 83686	•
<u>Name</u> Adrian B. Lar	ire correspondence (annu 1812 S. Florence, Namp	ual report notices):	•
<u>Name</u> Adrian B. Lar	Ire correspondence (annu 1812 S. Florence, Namp	ual report notices):	· · · · · · · · · · · · · · · · · · ·
Name Adrian B. Lan	Ire correspondence (annu 1812 S. Florence, Namp filing (optional):	ual report notices): ba, ID 83686	•
Name Adrian B. Lan Mailing address for futu Future effective date of gnature of organizer(s). (A ing in behalf of a member or for gnature Advance	Ire correspondence (annu 1812 S. Florence, Namp filing (optional):	ual report notices): na, ID 83686	- • •