

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2009 SEP 29 AM 11: 25

	VIII		•	SECRETARY U	F STATE	
1.	The name of the limited liability comp	pany is:		STATE OF I	BAMD	
Ellsworth & Company, LLC.						
2	2. The complete street and mailing addresses of the initial designated/principal office:					
	20484 Main St. Carey, Idaho 83320					
	(Street Address)		· · · · · · · · · · · · · · · · · · ·			
P.O. Box 39 Carey, Idaho 83320 (Mailing Address, if different than street address)						
3.	he name and complete street address of the registered agent:					
	R. Spence Ellsworth	2	20484 Main \$	St. Carey, Id. 83320		
	(Name)	(Street Address	5)	-	_0	
4.	The name and address of at least on company:	e member o	or manage	r of the limited lial	oility	
	Name			\ddress		
	Aaron Ellsworth	Aaron Ellsworth 3539 E. Briar Creek Ln. Suite E, Idaho Falls ID. 83406				
	R. Spence Ellsworth	20484 Main St. Carey, Id. 83320				
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5. Mailing address for future correspondence (annual report notices): P.O. Box 39 Carey, ld. 83320						
	F. d off ative data of filing (antions	.1\-				
Ο.	Future effective date of filing (optional	··/·	<del> </del>			
_	nature of organizer(s). (An organizer is a	member, or is				
actio	ng in behalf of a member or members).			Secretary of State use	only	
Sia	nature R. Memor Minu		Of 2008 Of 2008			
	ed Name: R. Spence Ellsworth		E			
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