

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

KE∑ S	(Instructions on back	orapplication)	C. A. C. A. C.
1.	The name of the limited liability comp	pany is:	STATE OF IDAHO
	2-W Custom, LLC		
2.	The street address of the initial regist	tered office is:	
	P.O. Box 202, American Falls, ID 8	33211 460 FILLMORE	
į	and the name of the initial registered	agent at the above address is:	
	Jeff Wynn		· ~_
3.	The mailing address for future corres	pondence is:	SAE
J.	Jeff Wynn, P.O. Box 202, Americal		
4			
	Management of the limited liability company will be vested in:		AH A
i	Manager(s) or Member(s)	(please check the appropriate box)	9: 37 STATE HO
á	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	Addres	SS
	Russeil Wynn	P.O. Box 202, American Fall	ls, ID 83211
	Jeff Wynn	P.O. Box 202, American Fall	ls, ID 83211
	the state of the s		
6. 3	Signature of at least of e person resp	onsible for forming the limited li	ability company:
	ignature: My	్త్ర Secreta	ry of State use only
	yped Name: <u>Jeff Wynn</u> apacity: Member	ruomeza.	
C	apacity: <u>wiember</u>	Scoptomis VI Cformis antsoforgamication p.65 Riversed 07/2002 CK:	
S	ignature	Comission (12002	IDAHO SECRETARY OF STATE 3/17/2004 05:0
	yped Name:	Omes I Commiss	12460 CT: 186228 BH: 733 100.00 = 100.00 ORGAN LL
C	apacity:	 의전한 보	

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