

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY 09 APR 20 AM 9: 50

(Instructions on back of application)

SECRETARY OF STATE

. The complete street and mailing addre	resses of the initial designated/principal office:
_	20 E, RIGBY, ID 83442
(Street Address)	SAME
(Mailing Address, If different than street address)	
The name and complete street addres	ss of the registered agent:
DENTON B. ANDERSEN	126 N 4020 E, RIGBY, ID 83442
	(Street Address)
The name and address of at least one company:  Name DENTON B. ANDERSEN	e member or manager of the limited liability  Address  126 N 4020 E, RIGBY, ID 83442
DEGLOG D. MIDEROLIA	
The second secon	
Mailing address for future corresponde	lence (annual report notices): 20 E, RIGBY, ID 83442
Future effective date of filing (optional)	l):
gnature of organizer(s). (An organizer is a m	nember, or is
ing in behalf of a member or members).	Secretary of State use only
gnature the short	1 Orbital
ped Name: R BRADLEY SMITH	T Bio
	NOS BOOK
gnature	IDANG SECRETARY OF STATE OF LANGE OF STATE OF ST
roed Name:	CK: 635 CT: 111826 NH: 11

1 0 20.00 = 100.00 CRAM LLC 0 2 1 0 20.00 = 20.00 EXPEDITE C # 3

