

**CERTIFICATION OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Continued)

4. The name and address of at least one member or manager of the limited liability company:

<u>Name</u>	<u>Address</u>
Greg Torgesen	P. O. Box 517 Soda Springs, ID 83276
Christopher A. Torgesen	3564 Summit Drive Pocatello, ID 83201