

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2010 JUN 15 AM 9: 21

(Instructions on back of application)

SECRETARY OF STATE

2. The complete street and mailing	g addresses of the initial designated/principal office:
3575 West 12000 North, Tetonia, Id (Street Address)	iano 83424
(Mailing Address, if different than street address.)	
3. The name and complete street	address of the registered agent:
InCorp Services, Inc. (Name)	921 S. Orchard Street, Suite G. Boise, Idaho 83705 (Street Address)
	(orical Hadrada)
4. The name and address of at lea	ast one member or manager of the limited liability
company:	and the monder of manager of the infined hability
<u>Name</u>	Address
Mary L. Glowacki	3575 West 12000 North Tetonia, Idaho83424
Jerome J. Glowacki	3575 West 12000 North Tetonia, Idaho 83424
octome o. Olowacki	3373 West 12000 Notin 16tonia, idano 63424
<u> </u>	
 Mailing address for future corres 	spondence (annual report notices):
3575 West 12000 North	Tetonia, Idaho 83424
. Future effective date of filing (op	otional):
	r is a member, or is
gnature of organizer(s). (An organizer	
gnature of organizer(s). (An organizer ting in behalf of a member or members).	Secretary of State use only
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