

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

	(Instructions on back of application)	08 OCT 23 AM 8: 28
1. The	name of the limited liability company is:	SECRETARY OF STATE STATE OF IDAHO
М	. C. H. Muroby Class & Haul	I I A
2. The complete street and mailing addresses of the initial designated/principal office:  129 N. 254 St. Nampa, TD. 83687  (Street Address)		
	ng Address, if different then street address)	
3. The name and complete street address of the registered agent:		
(Name	seph R. Murphy 129 N. 8544 & (Street Address)	1. Nompa, ID 831.87
<ol> <li>The name and address of at least one member or manager of the limited liability company:</li> </ol>		
	<u>Name</u>	Address
عاماً	mie muedy 189 N. 254 84. N	lampa, ID. 83687
5 Mailine		-
3. Maning	address for future correspondence (annual report no N. 85 & St. Nampa, ID. 8308	otices):
6. Future	effective date of filing (optional):	
Signature or acting in beha	of organizer(s). (An organizer is a member, or is all of a member or members).	
Signature	Jul Murphy	Secretary of State use only
Typed Name		

Si Typed Name: Tooph R. Murphy

Signature\_ Typed Name:

IDAHO SECRETARY OF STATE 10/23/2008 05:00 CK: 1864 CT: 238804 BH: 1141354 1 2 100.00 = 100.00 ORGAN LLC # 2