## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY (Instructions on back of applications)



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1.	The name of the limited liability company is:
2.	The address of the initial registered office is: 275 E. 12 ST., IDAHO FALLS, ID 83404 (not a PO Box)
	agent at that address is: KIMBERLY HOYT EDDY
	Signature of registered agent: www.hy Hont Eddy
3.	Is management of the limited liability company vested in a manager or managers?  \[ \sum \text{Yes}  \text{No}  \text{(check appropriate box)} \]
4.	If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.  Name:  Address:
	KIMBERLY HOYT EDDY 275 E. 12 ST., IDAHO FALLS, ID 83404
5.	Signature of at least one person listed in #5 above:
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