LIMITED LIABILIT	Y COMPANY 2003 SAN 15 AN OF A
(Instructions on back o	OLVILLAVIT VE UTSIL
1. The name of the limited liability comp	pany is: STATE OF IDAHO
Believ	vers Solutions, LLC
 The complete street address, and ma principal office: 	ailing address if different, of the initial designated/
1535 Troy	Ln., Pocatelo, ID 83201
 The name of the commercial register address of the non-commercial regist 	ed agent; or the name and complete street tered agent:
John Reed	1535 Troy Ln., Pocatelo, ID 83201
 The name and address of at least on company: 	e member or manager of the limited liability
Name	Address
John Reed	1535 Troy Ln., Pocatelo, ID 83201
Elizabeth Reed	1535 Troy Ln., Pocatelo, ID 83201
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5. Mailing address for future correspond	
1535 Troy	/ Ln., Pocatelo, ID 83201
6. Future effective date of filing (optiona	al).
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Signature of an organizer(s). (An organizer	
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br is acting in behalf of a required, and existing, in br members). Bignature <u>Ann Reco</u> Signature <u>Juneuttt</u> , Reco	nitial member Secretary of State use only
r is acting in behalf of a required, and existing, in remembers). Signature <u>John Reed</u> Typed Name: <u>John Reed</u>	nitial member Secretary of State use only
r is acting in behalf of a required, and existing, in r members). Signature <u>Ann Reco</u> Syped Name: <u>John Reed</u> Signature <u>Hunewittte</u> Rec Q	nitial member Secretary of State use only

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