

FILED EFFECTIVE

251



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 APR -6 01:11:36

CLERK OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

S &amp; F Robbins, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

431 W 100 N

(Street Address)

Blackfoot, ID 83221

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Suzanne Robbins

(Name)

431 W 100 N Blackfoot, ID 83221

(Street Address)

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

Name

Address

Suzanne Robbins

431 W 100 N, Blackfoot, ID 83221

Flora Robbins

310 East 16th Street, Idaho Falls, ID 83404

5. Mailing address for future correspondence (annual report notices):

431 W 100 N, Blackfoot, ID 83221

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

*Suzanne Robbins*

Typed Name:

Suzanne Robbins

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE  
 04/06/2011 05:00  
 CK: 647948 CT: 172099 BH: 1267937  
 1 @ 100.00 = 100.00 ORGAN LLC # 2

W102141