

ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application) 2006 APR -5 PM 12: 25

1.	The name of the limited liability comp	secretary of state State of IDAHO	
2.	The street address of the initial registered office is:		
	1480 N WOODRUFF AVE	aho Falls ID 8340/	
	and the name of the initial registered agent at the above address is:		
	ZAHE ELABED		
3.	The mailing address for future correspondence is:		
	1480 N WOODRUFF AVE, Idaho Falls ID 8340/		
4.	Management of the limited liability company will be vested in:		
	Manager(s) or Member(s)	(please check the appropriate box)	
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.		
	Name	Address	
	ZAHE MA ELABED	2241 BALBOA AVE IDAHO FALLS ID 83402	
	6. Signature of at least one person responsible for forming the limited liability company:		
	Signature: <u>La M. M. H. J. L.</u> Typed Name: ZAHE MA ELABED	Secretary of State use only	
	Capacity: 14	anization	
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	Signature	C termske	
	Typed Name:	IDANO SECRETARY OF STATE 94/95/2006 95 = 00 CK: 5996 CT: 147628 BH: 947549	
	Capacity:	CK: 5996 CT: 147628 BH: 947549	

1 = 100.00 = 100.00 URGAN LLC # 2 1 = 20.00 = 20.00 EXPEDITE C # 3

W 49213