



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 FEB -5 AM 9:18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

IDAPIGLT, LLC

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

367 N 465 W, Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

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

Mark Blair

367 N 465 W, Blackfoot, ID 83221

(Name)

(Street Address)

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

Name

Address

Mark Blair

367 N 465 W, Blackfoot, ID 83221

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

367 N 465 W Blackfoot, ID 83221

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Mark R. Blair

Typed Name: Mark Blair

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/05/2009 05:00
CK: 198372 CT: 172099 BH: 1155666
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Revised 07/2006

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