X 482	CERTIFICATE OF	ORGANIZATIO	N FILED EFFECT
	LIMITED LIABILI		
		TT COMPANY	11 Jan 18 Fill 4: 49
A TOL	(Instructions on bac	k of application)	
1. The n	ame of the limited liability co	mpany is:	STATE OF IDAHO
_	swift Rx LIC		•
	omplete street and mailing a	ddresses of the initial de	signated/principal office:
<u>_</u>	10 E Sunnyrid		
·	Address)	83702	· · · · · · · · · · · · · · · · · · ·
	g Address, if different than street address)	05702	
3. The n	ame and complete street add	dress of the registered a	gent:
	•	-	-
<u>Ja</u>	mes Morlans	440 E. Sunny	vidge CT
(Name		(Street Address)	- 10 922272
	ame and address of at least		
compa			
	Name I Z		Address
Ja	mes Morlanz	5 490 E. Sur	nyridge CT
		Boice	10 83702
		••	
		· · · ·	
5. Mailin	g address for future correspo	ondence (annual report	notices):
5. Mailin <u>49</u>	g address for future correspo <u> </u>	ondence (annual report r dige Ci R	notices): Doise 10 8370
49	D E Sunnyri	dge C- P	Doise 10 8370
49	ig address for future correspondent <u>D_ モー Sonnyri</u> e effective date of filing (optio	dge C- P	Doise 10 8370
<u>49</u> 6. Future	DE Sunnyri e effective date of filing (optio	dge C- R	Doise 10 8370
년연 6. Future Signature	D E Sunnyri	dge C- R	soise 13 8370
년연 6. Future Signature person.	<u>ວີ E Sບກກປະເ</u> e effective date of filing (optio	dge CT R	Doise 10 8370
년연 6. Future Signature person.	<u>ວີ E Sບກກປະເ</u> e effective date of filing (optio	dge CT R	soise 13 8370
년연 6. Future Signature person.	DE Sunnyri e effective date of filing (optio	dge CT R	soise 13 8370
년연 6. Future Signature person.	<u>ວີ E Sບກກປະເ</u> e effective date of filing (optio	dge CT R	Secretary of State use only
49 6. Future Signature person. Signature Typed Na Signature	$D \in Sunnyri e effective date of filing (option e of a manager, member of QaMorledon me: Tames Morlawi Morlawi$	dge CT P onal): or authorized <u>Member</u>	Secretary of State use only IDAHO SECRETARY OF STATE 91/19/2011 05= CK: 5280 CT: 246003 BH: 125
49 6. Future Signature person. Signature Typed Na Signature	DE Sunnyri e effective date of filing (option e of a manager, member o <u>QaMorlad</u> me: <u>Tames Morlawz</u>	dge CT P onal): or authorized <u>Member</u>	Secretary of State use only IDAHO SECRETARY OF STATE 01/19/2011 05:

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