

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY 00 AUG -7 Ph 2: 13

(Instructions on back of application)

STATE OF TOURS

		O'ME UT INAH
1.	The name of the limited liability company	is: EXCHANGE 1784 , LLC
2.		is: 195 South Broadway/P.O. Box 580,
	Blackfoot, ID 83221 agent at that address is: Shauna Romrell	and the name of the initial registered
3.	The mailing address for future corresponder	nce:P.O. Box 580, Blackfoot, ID 83221
4.	Management of the limited liability company will be vested in:	
	Manager(s) or Member(s) . (please che	eck the appropriate box)
	If management is to be vested in one or more manager(s), list the name(s) and address(es) at least one initial manager. If management is to be vested in the members, list the name(s) address(es) of at least one initial member. Name Address	
	Shauna Romrell	P.O. Box 580, Blackfoot, ID 83221
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6. —	Signature of at least one person responsible	for forming the limited liability company:
		Secretario SECRETHA OF STATE
		1DRHO SEURETRRY 9F75TATE
		1 @ 100.88 = 100.00 ORGAN LLC # 2
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