

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

STATE OF WARD

(Instructions on back of application)

		The fire
1.	The name of the limited liability con	mpany is:
	Medi-Graphix, LLC	
2.	The street address of the initial regis	istered office is:
	489 N. 300 West, Tetonia ID 834	
	and the name of the initial registered	d agent at the above address is:
	Jared Nusbaum	a agont at the above address is.
3.	The mailing address for future corres	spondence is:
	P.O. Box 117 Tetonia, ID 83452	
4.	. Management of the limited liability company will be vested in:	
	Manager(s) ✓ or Member(s)	-
	c (,	(please check the appropriate box)
	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
	Jared Nusbaum	P.O. Box 117 Tetonia, ID 83452
	Linda Nusbaum	P.O. Box 117 Tetonia, ID 83452
		700102
6. 5		onsible for forming the limited liability company:
	ignature: Justina Justina Mushaum	್ಟ್ರ Secretary of State use only
	yped Name. Jared Nusbaum apacity: Owner	- Vugagou - Vuga
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