

Signature_ Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

09 JUN -2 PM 1: 13

CECDETA

The name of the limited liability of	company is: STATE OF IDAHO	
•	addresses of the initial designated/principal office:	
(Street Address)		
PO E (Mailing Address, if different than street address)	Box 2, Sugar City, ID 83448	
The name and complete street ad		
Shane R. Worrell	420 West Poleline Rd, Rexburg, ID 83440	
(Name)	(Street Address)	44
The name and address of at least company:	t one member or manager of the limited liability	ţ
Name	Address	
Darin L. Larson	22 W 1st N, Sugar City, ID 83448	14.
Larry Singleton	266 N 2400 E, St Anthony, ID 83445	•
Corey Cook	4329 E 265 N, Rigby, ID 83442	
John Berry Jr	151 South Hidden Valley, Rexburg, 10 83440	
John Berry III	661 Dell Drive, Rexburg, ID 83440	
Mailing address for future corresp	·	. *
PO E	Box 2, Sugar City, ID 83448	
Future effective date of filing (option	ional):	
nature of organizer(s). (An organizer in ng in behalf of a}member αr members).	is a member, or is	
natureShane R. Worre	Secretary of State use only	