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	ARTICLES OF O	ity comi	PANY	O4 DEC	-3 PM 2	2: 36
1	(Instructions on bad	ck of application	n) ,	SECRETA.	ETY OF A	
1. The na	ime of the limited liability con	npany is.		STATE	MY OF ST OF IDAH(ATE
Mobi	e Concrete of Idaho, LLC				-, " ((<i></i>
2. The str	eet address of the initial regi	stered office is:	:			
<u>5325</u>	S. Whitley Drive, Fruitland,	ldaho 83619				
and the	name of the initial registered	d agent at the a	bove ado	lress is:		
Chels	ey D. Warrington					
3. The ma	iling address for future corres	spondence is:			···	
5325	S. Whitley Drive, Fruitland, I	daho 83619				
4. Managi	ement of the limited liability or	mpany will be	vested in			
	er(s) or Member(s)	_				
address	gement is to be vested in one (es) of at least one initial man (s), list the name(s) and add	ormore mana nager. If manag	gement is	t the name	ed in the	
address	gement is to be vested in one (es) of at least one initial ma	ormore mana nager. If manag	ger(s), lis gement is	t the name	ed in the	
address membe	gement is to be vested in one (es) of at least one initial man (s), list the name(s) and add	ormore mana nager. If manag	ger(s), lis gement is east one i	t the name to be vest nitial mem	ed in the ber.	3619
address membe	gement is to be vested in one (es) of at least one initial man (s), list the name(s) and add	or more mana nager. If manag ress(es) of at le	ger(s), lis gement is east one i	t the name to be vest nitial mem	ed in the ber.	9619
address membe Chelse 6. Signatur Signature	gement is to be vested in one (es) of at least one initial mands, list the name(s) and additionable. Name By D. Warrington of at least one person response: Chelsey D. Warrington	or more mana nager. If managers(es) of at le 5325 S. White	ger(s), lis gement is east one i	t the name to be vest nitial mem Address Fruitland	ed in the ber.	
6. Signature Signature Typed Na Capacity:	gement is to be vested in one (es) of at least one initial manters), list the name(s) and additionable of at least one person response: Chelsey D. Warrington	or more mana nager. If managers(es) of at le 5325 S. White	ger(s), lis gement is east one i	t the name to be vest nitial mem Address Fruitland	ed in the ber. I, Idaho 83 ity compan	
6. Signature Typed Na Capacity: Signature	gement is to be vested in one (es) of at least one initial mair(s), list the name(s) and additional mains of a control of the	or more mana nager. If manageress (es) of at le	ger(s), lis gement is east one i	t the name to be vest nitial mem Address Fruitland	ed in the ber. I, Idaho 83 ity compan	

IDAHO SECRETARY OF STATE
12/29/2004 05:00
CK: 3467 CT: 146111 BH: 784141
1 0 180.00 = 100.00 ORGAN LLC # 2

