



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY AUG - 1 AM 8: 59

	(Instructions on back	SECRETARY OF STATE
1.	The name of the limited liability comp	any is: STATE OF IDAHO
	Dunn Enterprises, LLC	
2.	The street address of the initial registe	ered office is:
	2262 West Highway 33, Rexburg, I	daho 83440
	and the name of the initial registered	agent at the above address is:
	Gene L. Dunn	
3.	The mailing address for future corresp	oondence is:
	2262 West Highway 33, Rexburg, I	daho 83440
4.	Management of the limited liability cor	mpany will be vested in:
	Manager(s) or Member(s)	(please check the appropriate box)
5.	management is to be vested in one or more manager(s), list the name(s) and ddress(es) of at least one initial manager. If management is to be vested in the tember(s), list the name(s) and address(es) of at least one initial member.	
	member(s), list the name(s) and address	ess(es) of at least one initial member.
	member(s), list the name(s) and address	ess(es) of at least one initial member. Address
	Name	Address
6.	Name Gene L. Dunn	Address 2262 West Highway 33, Rexburg, Idaho 83440
,	Signature of at least one person responsionature:	Address 2262 West Highway 33, Rexburg, Idaho 83440 onsible for forming the limited liability company:
-	Signature of at least one person responsionature: Philip A. Packer, Attornic	Address 2262 West Highway 33, Rexburg, Idaho 83440 onsible for forming the limited liability company:
-	Signature of at least one person responsionature:	Address 2262 West Highway 33, Rexburg, Idaho 83440 onsible for forming the limited liability company:
-	Signature of at least one person responsionature: Typed Name: Philip A. Packer, Attornicapacity: Organizer	Address 2262 West Highway 33, Rexburg, Idaho 83440 onsible for forming the limited liability company:
· ·	Signature of at least one person responsionature: Philip A. Packer, Attornic	Address 2262 West Highway 33, Rexburg, Idaho 83440 onsible for forming the limited liability company: Secretary of State use only Ey IDAHO SECRETARY OF STATE

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