

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 JUN -4 PM 3:47

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CMS, LLC

2. The complete street and mailing addresses of the initial designated office:

500 N COLLEGE ST, OAKLEY, ID 83346

(Street Address)

PO BOX 368, BURLEY, ID 83318-0368

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

NOLAND H CRITCHFIELD

(Name)

500 N COLLEGE ST, OAKLEY, ID 83346

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

NameAddress

NOLAND H CRITCHFIELD

500 N COLLEGE ST, OAKLEY, ID 83346

5. Mailing address for future correspondence (annual report notices):

PO BOX 368, BURLEY, ID 83318

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Noland H CritchfieldTyped Name: NOLAND H CRITCHFIELD

Signature _____

Typed Name: _____

Secretary of State use only

cert_org_llc Rev. 07/2010

IDAHO SECRETARY OF STATE
 06/04/2012 05:00
 CK: 1016652 CT: 172099 BH: 1326811
 1 @ 100.00 = 100.00 ORGAN LLC # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3

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