



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 FEB -2 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

T & E CONSULTING, LLC

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

4183 ROCKY RIDGE ROAD, IDAHO FALLS, ID 83406-5055

(Street Address)

SAME

(Mailing Address, if different than street address)

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

TAYLOR T. LUGO

(Name)

4183 ROCKY RIDGE ROAD, IDAHO FALLS, ID 83406

(Street Address)

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

Name

Address

TAYLOR T. LUGO

4183 ROCKY RIDGE ROAD, IDAHO FALLS, ID 83406

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

1655 1ST STREET, IDAHO FALLS, ID 83401-4305

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

MEMBER

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

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02/02/2009 05:00
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Revised 07/2008

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FILED EFFECTIVE