

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY APR 24 AM 9:51

12 3	(Instructions on back	k of application)	SEORETARY OF STATE	
1.	The name of the limited liability com	pany is:	STATE OF IDATIO	
2.	The street address of the initial registered office is: 2228 S. EAGLE POINTE DR., IDAHO FALLS, ID 83406			
	and the name of the initial registered agent at the above address is:  TY PAGE			
3.	The mailing address for future correspondence is: 2228 S. EAGLE POINTE DR., IDAHO FALLS, ID 83406			
4.	Management of the limited liability company will be vested in:  Manager(s) ☐ or Member(s) ✓ (please check the appropriate box)			
	<ol> <li>If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.</li> </ol>			
	Name		Address	
	TY PAGE	2228 S. EAGLE POINTE DR.		
		IDAHO FALLS, ID	83406	
6	Signature of at least one name of the same			
S	Signature of at least one person responsion responsion at least one person responsion re		Secretary of State use only	
T	ignatureyped Name:	toorpVorms/LLC forms/arisolorganization. p65	IDAHO SECRETARY OF STATE WWW D4/24/2006 05:00 CK: 1218 CT: 199575 BH: 951013	
С	apacity:	сорубот	1 8 100.00 = 100.00 ORGAN LLC # 2	