



Capacity: Member

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2004 MAY -7 A 9-14

1.	The name of the limited liability comp	pany is: SECRETERY OF STATE SECRETERY OF STATE
2. The street address of the initial registered office is:		ered office is:
	190 E. Washakie St. Meridian, ID 83642	
	and the name of the initial registered	agent at the above address is:
3.	The mailing address for future corresp 190 E. Washakie St. Meridian, ID 8	
4.	Management of the limited liability company will be vested in:	
	Manager(s) or Member(s)	(please check the appropriate box)
5.	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.	
	Name	Address
	Jacob Bunker	190 E. Washakie St. Meridian, ID 83642
	Ann-Marie Bunker	190 E. Washakie St. Meridian, ID 83642
6. Signature of at least one person responsible for forming the limited liability company:		
	Signature:	Secretary of State use only
	Capacity: Member	otezzi
	Signature Ann Mario Bi	IN RELLANDING SECRETARY OF STATE
	Typed Name: Ann-Marie Bunker	IDANO SECRETARY OF STATE