



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2006 SEP 25 AM 9:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

BLACK NIGHT LIMO, LLC

2. The street address of the initial registered office is:

477 SHOUP AVENUE, SUITE 109, IDAHO FALLS, IDAHO 83401

and the name of the initial registered agent at the above address is:

STEVEN J WRIGHT

3. The mailing address for future correspondence is:

482 8TH STREET, IDAHO FALLS, IDAHO 83402

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
<u>JEFFERY C. WALBOM</u>	<u>2530 N 35TH W, IDAHO FALLS, IDAHO 83402</u>
<u>MICHAEL DALESSI</u>	<u>482 8TH ST., IDAHO FALLS, IDAHO 83402</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: *Jeffery C. Walbom*
 Typed Name: JEFFERY C. WALBOM
 Capacity: MEMBER

Signature:
 Typed Name:
 Capacity:

Secretary of State use only

g:\corpforms\LLC\formstartoforganization.pdf
 Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE
 09/25/2006 05:00
 CK: 12969 CT: 13988 BH: 976784
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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