



CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY **FILED** **EFFECTIVE**
09 OCT -9 AM

09 OCT -9 AM 8:47

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Double M Supply LLC

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

628 Gary St., Pocatello, ID, 83201

(Street Address)

(Mailing Address, if different than street address)

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

Rick Mabey

628 Gary St., Pocatello, ID, 83201

(Name)

(Street Address)

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

Name _____

Address

Donna Marlatt

Rt 2 Box 180 Ballard, Pocatello, ID, 83202

Rick Mabey

628 Gary St., Pocatello, ID, 83201

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

628 Gary St., Pocatello, ID, 83201

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: Lick Mabey

Signature_____

Typed Name: _____

Secretary of State use only

W 87513

IDAH0 SECRETARY OF STATE

10/09/2009 05:00

CK: 1545 CT: 241236 BH: 1198447

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|--------------|--------|----------------|
| 1 @ 100.00 = | 100.00 | ORGAN LLC # 2 |
| 1 @ 20.00 = | 20.00 | EXPEDITE C # 3 |

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Revised 07/2008