

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY AM 8: 41

(Instructions on back of application) CRETARY OF STATE

	name of the limited liability com	pany is: STATE OF IDAHO
	The street address of the initial registered office is: 355 PARTRIDGE LANE REXBURG, ID 83440	
	the name of the initial registered	d agent at the above address is:
	The mailing address for future correspondence is: 3456 E. 17TH ST SUITE 140 AMMON, ID 83406	
4. The	The limited liability company will be:	
Man	Manager-managed or Member-managed (please check the appropriate box)	
5. If ma	If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member.	
	Name	Address
MI	CHAEL JUSTIN HOOPES	355 PARTRIDGE LANE
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6. Sigr	nature of at least one person res	sponsible for forming the limited liability company:
Sign	ature: M M NM	Secretary of State use only
Туре	d Name: MICHAEL JUSTIN H	OOPES
Capa	acity: MANAGER	- Proposition of the control of the
	ature	Secretary of State use only Secretary of State use only
• •	ed Name:	CK: 2945 CT: 171497 BH: 1188844 1 8 188.88 = 109.88 ORGAN LLC #

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