



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 DEC -3 AM 8:28

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

FAT SMITTY'S L.L.C.

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

5126 E. Rivie Hwy

(Street Address)

IDAHO FALLS

IDAHO

83401

(Mailing Address, if different than street address)

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

Wesley T. Smith

(Name)

5126 E. Rivie Hwy

(Street Address)

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

Name

Address

Roxanne U. Smith

5126 E. Rivie Hwy

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

5126 East Rivie Hwy IDAHO FALLS ID. 83401

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

Wesley T. Smith

Typed Name:

Wesley T. Smith

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
12/03/2008 05:00
CK: 4148 CT: 151153 DN: 1146784
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W79571