

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 09 0CT -9 AM 8: 42

DE SOL	(Instructions on bac	k of application)	SECRETARY OF STATE
1. The name	of the limited liability co	ompany is:	STATE OF IDAHO
:	JEN	SEN AND CARLSON LLC	
2. The compl	ete street and mailing a	ddresses of the initial of	designated/principal office:
. 4.		H WEST, IDAHO FALLS, ID	DAHO 83402
(Street Addres	s)		
(Mailing Addre	ess, if different than street address)		
3. The name	and complete street add	dress of the registered	agent:
JANET	JENSEN-FULLMER	1855 CARMEL	, IDAHO FALLS, ID 83402
(Name)		(Street Address)	
		en trade i i lan e legal de	
· ·	and address of at least	one member or manag	ger of the limited liability
company:	Mawaa		Address.
IANE	Name T JENSEN-FULLMER	1855 CARMEL	, IDAHO FALLS, ID 83402
<u> </u>			
R	OGER CARLSON	5760 S 55 W .	IDAHO FALLS, ID 83402
	<u> </u>	•	
		and the second of the second o	
. Mailing add	lress for future correspo	•	
· 	1855 CARI	MEL, IDAHO FALLS, ID 83	3402
. Future effe	ctive date of filing (optio	nal):	The state of the s
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gnature of org	anizer(s). (An organizer is	a member, or is	
	a member or members).	<u> </u>	<u> </u>
	(A) J		Secretary of State use only
gnatur e	Ref June Tel	amer :	
ped Name:	Janet Jensen-Fu	Jamen I mer Revised 07/2008	and the second second second
		2008 2008	_ IDAHO SECRETARY OF STAT
gnature	Karan Jank	TO T	10/09/2009 05
			CK: 7380 CT: 241244 RH: 11