

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on ba	ck of application)	
1.	The name of the limited liability cou	mpany is: STATE  STATE OF DAHO	
2.	_	e street address of the initial registered office is: 5 West Main Street, Rexburg, ID 83440	
	and the name of the initial registere	ed agent at the above address is:	
3.	The mailing address for future correspondence is:  15 West Main Street, Rexburg, ID 83440		
4.	Management of the limited liability company will be vested in:		
	Manager(s)  or Member(s) [	(please check the appropriate box)	
5.	address(es) of at least one initial ma	e or more manager(s), list the name(s) and anager. If management is to be vested in the dress(es) of at least one initial member.	
	Name	Address	
	CHAD WARD	15 West Main Street, Rexburg, ID 83440	
~			
	Cign of the safe and the safe a		
	Signature of at least one person res	ponsible for forming the limited liability company:	
. 1	Typed Name: CHAD WARD Capacity: Member	Secretary of State use only  IDAHO SECRETARY OF STATE  ### DESCRIPTION	
ç	Signature	IDAHO SECRETARY OF STATE  95/12/2004 05:00  CK: 1202 CT: 179145 BH: 744635	
	yped Name:	CK: 1202 CT: 179145 BH: 744635 1 P 100.00 = 100.00 ORGAN LLC # 2	