

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	<u> </u>	(Instructions on b	ack of application)	50, 50, 5	
1.		f the limited liability c			
2.	The street address of the initial registered office is:				
	2114 ROBB ST. IDAHO FALLS, ID 83402				
	and the name of the initial registered agent at the above address is: KENNETH JONES				
3.	The mailing address for future correspondence is:				
	329 S WOODRUFF IDAHO FALLS, ID 83401				
4.	Management of the limited liability company will be vested in:				
	Manager(s) or Member(s) (please check the appropriate box)				
	If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.				
	Name		A	Address	
	K.C. JONES		2114 ROBB ST. IDAHC	2114 ROBB ST. IDAHO FALLS, ID 83402	
		1	-		
6. 8	Signature of a	least one person res	ponsible for forming the limite	ed liability company:	
Si	ignature:	hobert Can	all [- " " - " - " - " - " - " - " - " - "	cretary of State use only	
_		ROBERT CRANDALI	atton.p56	detary or State use only	
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