

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on ba	ck of application)	2012 AUG 10 AM 10: 46
1.	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
	R4, LLC		STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated/principal office:		
	1131 w 145 n Idaho Falls, Id 83401		
	(Street Address)		
	(Mailing Address, if different than street address	3)	
3.	The name and complete street address of the registered agent:		
	T	1101 145 TIL T	15 T. 00401
	James Rigoulot (Name)		1131 w 145 n Idaho Falls, Id 83401 (Street Address)
		,	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Δ	ddress
	James Rigoulot	1131 w 145 n Idaho Falls, Id 83401	
	Janeen Rigoulot	1131 w 145 n Idaho Falls, Id 83401	
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5.	Mailing address for future correspondence (annual report notices):		
	1131 w 145 n Idaho Falls, Id 83401		
		* -	
6.	Future effective date of filing (opti-	onal):	
	nature of a manager, member	or authorized	
ber	son.		Secretary of State use only
Sia	nature II D F3		

Michael Banner

Typed Name: Organizer

Signature __

Typed Name:

IDAHO SECRETARY OF STATE

08/10/2012 05:00

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