

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

OF HAR O

09 MAR 30 AM 8: 56

(Instructions on back of application)

1. The name of the limited liability company is:

Typed Name: _____

SECRETARY OF STATE STATE OF IDAHO

	R\	WK LLC	
The complete street	<u>-</u>	es of the initial d Rigby, Idaho 83442	esignated/principal office:
(Street Address)	5170 E 100 N,	, ugo, juano 00442	
(Mailing Address, if different			
. The name and comp	ete street address o	of the registered	agent:
Karen Morgenegg		3748 E 100 N, Rigby, Idaho 83442	
(Name)	(Stre	eet Address)	
The name and addre	ess of at least one me	ember or manag	er of the limited liability
<u>Nam</u>	<u>e</u>	Address	
Karen Morgenegg		3748 E 100 N, Rigby, Idaho 83442	
 Mailing address for f 	uture correspondenc	e (annual report	notices):
	3748 E 100 N,	Rigby, Idaho 83442	
 Future effective date 	of filing (optional): _		
ignature of organizer(s)	· · · · · · · · · · · · · · · · · · ·	oer, or is	
ting in behalf of a member	or members).	:	Secretary of State use only
ignature Koeren ?	Myeres	c.PMD	*****
voed Name:	Karen Morgenegg		
, pod Hame.		ms/cert	
ionature		LC form 07/200	IBAHO SECRETARY OF STATE
cting in behalf of a member Signature **Rece 7 Syped Name: Signature	or members).	SI 1O '1-ag_k. PMD 0772008	Secretary of State use only IBANO SECRETARY OF STATE

03/30/2009 05:00 CK: 3% CT: 235598 NH: 1163515 1 0 100.00 = 100.00 ORSON LLC 0 2