ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

PINED/EFFECTIVE

	LINITED LIABILITY COMPANY
	CINITED LIABILITY COMPANY さいまでは、 (Instructions on back of application)
1.	The name of the limited liability company is: KASPER ENTERPRISES, LLC
2.	The address of the initial registered office is: 329 S WOODRUFF AVE, IDAHO FALLS, ID 83401
	and the name of the initial registered agent at that address is: CHRISTOPHER KASPER
3.	The mailing address for future correspondence: 1731 EAST 16TH ST., IDAHO FALLS, ID
4.	Management of the limited liability company will be vested in:
	Manager(s) or Member(s) X. (please check the appropriate box)
5.	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 members, list the name(s) and address(es) of at least one initial member. Name Address
	CHRISTOPHER KASPER 1731 EAST 16TH ST., IDAHO FALLS, ID 83404
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5.	Signature of at least one person responsible for forming the limited liability company: Signature 1
	Signature
	Typed Name

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