				RGANI. ITY CO		<b>FILED EI</b> 2007 JUL 15 AM	FFECTIV ୧: ୮୦
	OF D		uctions on ba				
1,		ne of the limit on Depot LLC	•	mpany is:		SECHERARI OF ST STATE OF IDAM	
2.	The street address of the initial registered office is:						
	396 Y	ellowstone St	e B, Pocatello	o, ID 83201			
		name of the ir R Thomas	nitial registere	ed agent at ti	he above a	ldress is:	
3.	The ma	ling address f	or future corre	espondence	is:		
	<u>,</u> 396 Ye	ellowstone Ste	e B, Pocatelio	, ID 83201			
4.	Manage	ment of the lir	nited liability of	company wil	l be vested	in:	
	Manage	_			check the approp		
	address	(es) of at leas	t one initial m	anager. If m	anagemen	list the name(s) and is to be vested in the initial member	
	address	(es) of at leas	t one initial m me(s) and ad	anager. If m	anagemen		
	address membe	(es) of at leas (s), list the na	t one initial m me(s) and ad	anager. If m dress(es) of	anagemen fat least on	is to be vested in t initial member.	he
	Address member	(es) of at leas (s), list the na Nam R Thomas	t one initial m me(s) and ad e	anager. If m dress(es) of <u>396 Yell</u>	anagemen fat least on owstone S	is to be vested in t initial member. Address e B, Pocatello, ID	he 83201
6.	Address member Melvin	(es) of at leas (s), list the na Nam R Thomas	t one initial m me(s) and ad e ne pe <b>r</b> \$oŋ re <b>s</b>	anager. If m dress(es) of <u>396 Yell</u>	anagemen fat least on owstone S	is to be vested in t e initial member. Address	he 83201
6. S T	Address member Melvin Signature Signature Typed Na	(es) of at leas (s), list the na Nam R Thomas	t one initial m me(s) and ad re ne person res	anager. If m dress(es) of <u>396 Yell</u>	anagemen fat least on owstone S	is to be vested in t initial member. Address e B, Pocatello, ID	he 83201 
6. S T C	Address member Melvin Signature Signature Typed Na	(es) of at leas (s), list the na Nam R Thomas	t one initial m me(s) and ad re ne person res	anager. If m dress(es) of 396 Yell	anagemen fat least on owstone S	Address Address Re B, Pocatello, ID e limited liability cor Secretary of State us	he <u>83201</u> mpany: e only RETOPY OF STOTE
6. 5 7 0 5 7	address member Melvin Signature Signature Capacity: Signature Fyped Na	(es) of at leas (s), list the na Nam R Thomas	t one initial m me(s) and ad e ne person res	anager. If m dress(es) of 396 Yell	anagemen fat least on owstone S	e limited liability cor Secretary of State us	he 83201 mpany: e only RETARY OF STATE