



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

10 OCT -4 AM 8:20

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Rx Express LLC (Delivery Service)

2. The complete street and mailing addresses of the initial designated/principal office:

2153 Haw Creek Circle

(Street Address)

Emmett Id 83617

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Diane E. Strauchon 2153 Haw Creek Circle Emmett Id
(Name) (Street Address) 83617

4. The name and address of at least one member or manager of the limited liability company:

Name	Address
<u>Diane E. Strauchon</u>	<u>2153 Haw Creek Circle Emmett Id</u> <u>83617</u>
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):

2153 Haw Creek Circle Emmett, Id 83617

6. Future effective date of filing (optional): Soon as possible

Signature of a manager, member or authorized person.

Signature Diane E. Strauchon
Typed Name: * Diane E. Strauchon

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/05/2010 05:00
CK: 3505 CT: 251788 BH: 1241751
1 @ 100.00 = 100.00 ORGAN LLC # 2

W96945