## FILED EFFECTIVE



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

06 OCT 31 PM 1: 08

1.	The name of the limited liability comp	pany is:	SECRETARY OF STATE STATE OF IDAHO	
2.	The street address of the initial registered office is: 3821 Professional Way #15 Idaho Falls, Idaho 83402			
	and the name of the initial registered agent at the above address is:  Jana Harris			
3.	The mailing address for future correspondence is:  1023 N.1200 E. Shelley, Idaho 83274			
4.	Management of the limited liability company will be vested in:			
	Manager(s) ✓ or Member(s) (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 member(s), list the name(s) and address(es) of at least one initial member.			
	Name		Address	
	Jana Harris	1023 N. 120	00 E. Shelley,Idaho 83274	
	Jeff Harris	1023 N. 120	00 E.Shelley ,Idaho 83274	
			W-111	
6. Signature of at least one person responsible for forming the limited liability company:  Signature: Charles Alas Seembar of State up on the				
	Signature: Jana Harris		Secretary of State use only	
	Capacity: Manager		Societary of State and Only	
			w 55872	
	Signature	·	100 Juli	
	Typed Name:	<del></del>	IDAHO SECRETARY OF STATE \$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Capacity:	<u> </u>	E CK: 114 CT: 266041 BH: 998800	