

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY 301 23 41 8: 48

(Instructions on back of application)

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1.	The name of the limited liability compa	any is:
	TETON DELIVERY, LLC	
2.	The street address of the initial register	ered office is:
	329 S. WOODRUFF IDAHO FALLS	S, IDAHO 83401
	and the name of the initial registered a	agent at the above address is:
	BRIAN COON	
3.	The mailing address for future corresp	oondence is:
	329 S. WOODRUFF IDAHO FALLS	S, IDAHO 83401
4.	Management of the limited liability cor	npany will be vested in:
	Manager(s) v 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) or 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
	BRIAN COON	329 S. WOODRUFF
		IDAHO FALLS, IDAHO 83401
	BENSON SMITH	329 S. WOODRUFF
		IDAHO FALLS, IDAHO 83401
_		oneible for forming the limited lightlity company:
	Signature: Signature:	onsible for forming the limited liability company: Secretary of State use only
	Typed Name: BRIAN COON	Secretary of State use only
	Capacity: MANAGER	IDAHO SECRETARY OF STATE 10/23/2002 05:00 CK: 6804 CT: 88345 BH: 642148 1 9 190.08 = 100.00 ORGAN LLC
	Signature	IDAHO SECRETARY OF STATE
	Typed Name: BENSON SMITH	IDAHO SECRETARY OF STATE 10/23/2002 05:04 CK: 6804 CT: 88345 BH: 642146 1 9 190.00 = 100.00 ORGAN LLC
	Canacity: MANAGER	1 9 190.00 = 100.00 DRGAN LLU

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