1	(Instructions on	ORGANIZATION FILED/EFFECTIV LITY COMPANY May 25 9 50 AM 'Ol back of application) SECRETATION ATE STATION ATE STATION ATE
2.	The address of the initial registered office is: <u>4377 Redgrass Ct.</u> ,	
	Meridian, Idaho 83642	and the name of the initial registered
	agent at that address is: <u>David L.s</u>	mith
	Signature of registered agent :	ve Smit
3.	Management of the limited liability compared	any will be vested in:
	Manager(s) 🖾 or Member(s) 🗌 . (please	e check the appropriate box)
4.	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
	David L. Smith	<u>4377 Redgrass Ct.</u>
		Meridian, Idaho 83642
	Signature of at least one person responsi	ble for forming the limited liability company:
5.	Dave Smith	
5.	Dave Smith	IDAHU SECRETARY OF STATE Secretary of State use only 95/25/2001 09:00
5.	Dave Smith	S 95/25/2001 99:00 Image: CK: CR5H CT: 146825 BH: 399237
5.	Dave Smith	X 95/25/2001 99:00 Image: CK: CR5H CT: 146825 BH: 399237