CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

09 OCT 13 AM 8= 54

(Instructions on pack	. Of application)		
The name of the limited liability con	npany is:	SECRETARY OF STATE OF IDA	STATE HO
IAS AIR, LLC			
The complete street and mailing add	dresses of the initial des	ignated/principal o	ffice:
	FALLS IDAHO 83405-0	538	
(Street Address)			
D.O. Box 50591 IDAHO FALLS, I (Mailing Address, if different than street address)	D 83405		
3. The name and complete street addr	ress of the registered age	ent:	
THERESA WOODMAN	1403 So, Bellin Rd.	Id. Falls, ID	83402
(Name)	(Street Address)	· · · · · · · · · · · · · · · · · · ·	
 The name and address of at least of company: Name 		dress	•
CHIEDISCA, LANCOMANI	1403 So. Bellin Rd.	TA Dalle IN	83402
THERESA WOODMAN	A403 SO. BETTHI RU.	IU. FALIS, IV	03402
	The state of the s	and the second	All Control of the
5. Mailing address for future correspon	idance (annual report no	ticae):	
	•	uces).	
P.O. Box 50591 Idaho Falls, I	daho 83405		
6. Future effective date of filing (option	nal):N/A	**************************************	
ignature of organizer(s). (An organizer is a	ı member, or is		
cting in behalf of a member or members).		Secretary of State use only	,
ignature Therea (No.	CIWA-	· · · · · · · · · · · · · · · · · · ·	* **
		- - -	
yped Name: THERESA WOODMAN	NormstLC formstoart_org_k		
	22008	IDANO SECRETA	BY OF STATE
ignature	4 07/2	10/13/200	9 05:
yped Name:	TOTAL BEST	CK: 1533 CT: 2412 1 8 188.00 = 180.	

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