

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

1.	The name of the limited liability company is:			SQUAY CE STAF
	Capital Resource Management L.L.C.			Soft Carried
2.	The street address of the initial registered office is:  3660 Vaughn St			
	and the name of the initial registered agent at the above address is:  Caleb Wood			
3.	The mailing address for future correspondence is: 3660 Vaughn St, Idaho Falls, Id 83406			
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		
	Caleb Wood	3660 Vaug	ghn St, Idah	o Falls, Id 83406
6.	Signature of at least one person respo	nsible for fo	orming the li	mited liability company:
•	Signature: Colo Tuel		88	Secretary of State use only
	Typed Name: Caleb Wood Capacity: Manager Signature		IDAHO SECRETARY OF STATE  OPEN OF ST	
			5 forms/ei	
	Typed Name:		omstillCfoms Revised 07/2002	IDAHO SECRETARY OF STATE
	Capacity:		Sp. CC	@2/98/2006 05:00 CK: 5991 CT: 187651 BH: 936775 1 8 188 98 = 188 98 DRGAN LLC #

1 # 100.00 = 100.00 UKGAN LLC # 4 1 @ 20.00 = 20.00 EXPEDITE C # 5