



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 APR 16 AM 8:20  
SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

R & T STANGER, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

767 Academic Dr, Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Randy Stanger

(Name)

767 Academic Dr, Twin Falls, ID 83301

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name**

**Address**

Randy Stanger

767 Academic Dr, Twin Falls, ID 83301

Mary T. Stanger

767 Academic Dr, Twin Falls, ID 83301

5. Mailing address for future correspondence (annual report notices):

767 Academic Dr, Twin Falls, ID 83301

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Randy Stanger

Signature

Typed Name:

Mary T. Stanger

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE  
04/16/2009 05:00  
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FILED EFFECTIVE