251

FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

12084387146

(Instructions on back of application)

2009 DEC 28 PM 3: 53

(mondono to	,	SECRETARY (	) SIATE
. The name of the limited liability company is:		STATE OF	IDAHO
STAF	RR COUNTRY SISTERS L	_c ·	
2. The complete street and mailing	addresses of the initial	designated/principal offi	ice:
-	ELLIS STREET - PAUL, I		·
(Street Address)			
(Mailing Address, if different than street address	5)		
3. The name and complete street ac	ddress of the registered	d agent:	
ROSE M HANSEN	39 SOUTH 700	WEST - BURLEY, ID 8334	7
(Name)	(Street Address)		
<ol> <li>The name and address of at leas company:</li> <li>Name</li> </ol>		Address	
ROSE M HANSEN	39 SOUTH 700	39 SOUTH 700 WEST - BURLEY, ID 83318	
LAURIE MOUNCE	572 EAST ELLIS	STREET - PAUL, ID 8334	7:
			-
			<del> </del>
			<del></del>
		· · · · · · · · · · · · · · · · · · ·	<del>-1-1-2-2-2-1</del>
<ol> <li>Mailing address for future corresp 572 EAST</li> </ol>	pondence (annual repo ELLIS STREET - PAUL, II	•	
6. Future effective date of filing (opt	ional):	· V ·	
Signature of organizer(s). (An organizer	is a member, or is		
acting in behalf of a member or members).		Secretary of State use only	
Signature Jaure 1000	Me III		
Typed Name: LAURIE MOUN	<b>~</b> _   j		
signatura RAD DO STAND	A pitoms U.C. furnstoor	IDAHO SECRETARY O	F STATE
Signature / //////////////////////////////////		12/28/2009 CK: 363360 CT: 172099	05 = 00 BH: 1200988
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