

## ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 08 MAY 29 AM 8: 50

CE ST	(Instructions on back of applica	OLUNCIAN DI SIMIL
1.	The name of the limited liability company is:	STATE OF IDAHO
	GROVER DISTRIBUTING, LLC	
2.	The street address of the initial registered offi	ce is:
	698 MARK AVE IDAHO FALLS, ID 83401	
	and the name of the initial registered agent at	the above address is:
	TROY GROVER	
3.	The mailing address for future correspondence	e is:
	3456 E. 17TH ST SUITE 140 AMMON, ID 8	3406
4.	The limited liability company will be:	
	Manager-managed 📝 or Member-manage	d [ (please check the appropriate box)
	If manager-managed, list the name(s) and add If member-managed, list the name(s) and add Name	
	TROY GROVER 698 MA	RK AVE IDAHO FALLS, ID 83401
•		ion formation that the track that the commence
Ö.	Signature of at least one person responsible f	or forming the limited liability company:
	Signature: Way Volve	Secretary of State use only
7	yped Name: TROY GROVER	- Hizzarion
(	Capacity: MANAGER	18 W14714
	and the second of the second o	126
3	Signature	23
1	Signature	IDAHO SECRETARY OF STA 25/29/20/08 / 25/29/20/08 / 25/29/20/08 / 25/29/20/08 / 25/29/20/08 / 25/29/20/08 / 25/29/20/20/20/20/20/20/20/20/20/20/20/20/20/