

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

	·		A3 ##A / = A):
1.	The name of the limited liability comp	any is:	07 FEB 15 PM 1: 20
	5 Star Vending Services, L.L.C.		SECRETARY OF STATE
2.	The street address of the initial register	ered office is:	STATE OF IDAHO
	12435 W. Murchison St. Boise, Idah	no 83709	
	and the name of the initial registered a	agent at the above addr	ess is:
3.	The mailing address for future correspondence is: 12435 W. Murchison St. Boise, Idaho 83709		
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
	Joe Watson Jr.	12435 W. Murchison	St. Boise, Idaho 83709
		1224 S. Cassia Pl. Nampa, Idaho 83686	
	Greg Hill 1224 S. Cassia Pl. Nampa, Idaho 83686		
		At the state of th	
6. Signature of at least one person responsible for forming the limited liability company:			mited liability company:
	Signature da un		Secretary of State use only
	Typed Name: Joe Watson Jr	yd uogez	
	Capacity: Manager		IDAHO SECRETARY OF STATE
	Signature 3 A Mini	proVorms/LLC/forms/artsc/forganization.p65 Ravised 07/2002	CK: 1854389 CT: 172899 BH: 1833660
	Typed Name: Greg Hill	ometLC forms	100.00 - 100.00 UKUAN LLC # 8
	Capacity: Manager	Rev	MANAPP