ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY 1 of application) AM 8: 38

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STATE OF IN STATE

The address of the initial registered office is: 329 S. Woodruff Idaho Falls, Idah 83401 and the name of the initial register agent at that address is: Steve Crandall and the name of the initial register agent at that address is: Steve Crandall Signature of registered agent: Management of the limited liability company will be vested in: Manager(s) or Member(s) . (Please check the appropriate box) If management is to be vested in one or more manager(s), list the name(s) and address(es) at least one initial manager. If management is to be vested in the members, list the name(s) and address(es) of at least one initial member. Name Address 8340 Randy Smith 2794 St. Charles Idaho Falls, II Melanie Smith 2794 St. Charles Idaho Falls, II Signature of at least one person responsible for forming the limited liability company: 1080 Stitutes State only 99/28/2898 69:88 000 000 000 000 000 000 000 000 000	The name of the limited lia	bility company is: _	RMK, L	LC	WAL OF	IDAHO''L	-
and the name of the initial register agent at that address is: Steve Crandall Signature of registered agent: Management of the limited liability company will be vested in: Manager(s) or Member(s) . (Please check the appropriate box) If management is to be vested in one or more manager(s), list the name(s) and address(es) at least one initial manager. If management is to be vested in the members, list the name(s) and address(es) and address(es) of at least one initial member. Name Address 8340 Randy Smith 2794 St. Charles Idaho Falls, II Melanie Smith 2794 St. Charles Idaho Falls, II Signature of at least one person responsible for forming the limited liability company: Rondy Smith 109728/2006 9:206 CK 5775 CT: 883.88 98.88 0800 IIC 8 P						The same of the sa	
agent at that address is: Steve Crandall Signature of registered agent: Management of the limited liability company will be vested in: Manager(s) or Member(s) . (Please check the appropriate box) If management is to be vested in one or more manager(s), list the name(s) and address(es) at least one initial manager. If management is to be vested in the members, list the name(s) and address(es) of at least one initial member. Name Address Address Sandy Smith 2794 St. Charles Idaho Falls, III Melanie Smith 2794 St. Charles Idaho Falls, III Signature of at least one person responsible for forming the limited liability company: Rondy Smith Distriction Strategy only 29/28/2000 99:80 CK: 5475 IT: 8945 SH: 351384 18 189.88 - 189.88 0668H IIC BP	The address of the initial re	egistered office is:_	329 S	. Woo	odruff T	daho E	alls, Idah
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Manager(s) or Member(s) . (Please check the appropriate box) If management is to be vested in one or more manager(s), list the name(s) and address(es at least one initial manager. If management is to be vested in the members, list the name(s) and address(es) of at least one initial member. Name Address 8340 Randy Smith 2794 St. Charles Idaho Falls, II Melanie Smith 2794 St. Charles Idaho Falls, II Signature of at least one person responsible for forming the limited liability company: Randy Smith 1000) <u>ノ〜</u>			
If management is to be vested in one or more manager(s), list the name(s) and address(es) at least one initial manager. If management is to be vested in the members, list the name(s) and address(es) of at least one initial member. Name Address Syno Randy Smith 2794 St. Charles Idaho Falls, II Melanie Smith 2794 St. Charles Idaho Falls, II Signature of at least one person responsible for forming the limited liability company: Tondy Sm 141 1000 CREATY OF SIZE ISSO ONLY 1000 CREATY OF SIZE ISSO ONLY 29/28/2018 99:200 CR: 5475 CT: 88345 BH: 351384 1 2 100.00 = 100.00 = 100.00 ENGON LIC # 2	Management of the limited	liability company	will be v	ested	in:		
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