FILED EFFECTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2003 OCT 15 AM 8: 34

1.	The name of the limited liability comp	pany is: STATE OF IDAHO
2.	The street address of the initial registe	tered office is:
	680 N 2100 E St. Anthony, Idaho	83445
	and the name of the initial registered a	agent at the above address is:
3.	The mailing address for future corresp	pondence is:
	680 N 2100 E St. Anthony, Idaho	83445
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
	Brett L. Jensen	422 E 2 South Rexburg, Idaho 83440
	Coy B. Crapo	197 N 2000 E Rexburg ,Idaho 83440
	Bruce K. Crapo	680 N 2100 E St. Anthony, Idaho 83445
6. Signature of at least one person responsible for forming the limited liability comp		onsible for forming the limited liability company:
	Signature: Prott Incom	Secretary of State use only
	Typed Name: Brett L. Jensen Capacity: Manager	wizabon.
	Capacity. Manager	IDAHO SECRETARY OF STATE 10/15/2003 05: CK: 1137 CT: 173604 BH: 70
	Signature Signature K. Crops	725002
	Typed Name: Bruce K. Crapo	TOTAL
	Capacity: Manager	CK: 1137 CT: 173694 BH: 70

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