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(Instructions on back of application)     SECRETARY OF STATE STATE OF IDAHO     STATE OF IDAHO     Address     Gerry E. Kimery     IDAHO		
Kimery Enterprises, LLC     2. The street address of the initial registered office is:     1080 East 15th Street, Idaho Falls, ID 83404     and the name of the initial registered agent at the above address is:     Gerry E. Kimery     3. The mailing address for future correspondence is:     1080 East 15th Street     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 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     Gerry E. Kimery   1080 East 15th Street, Idaho Falls, ID, 83404     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071	LIMITED LIABILIT	CYCOMPANY2007 JAN 19 AM 9: 26of application)SECRETARY OF STATE
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Gerry E. Kimery   1080 East 15th Street, Idaho Falls, ID, 83404     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     Gene E. Kimery   Secretary of State use only     State use only   Secretary of State use only	address(es) of at least one initial man	ager. If management is to be vested in the
Gene E. Kimery   9416 St. Andrews, Santee, CA 92071     9416 St. Andrews, Santee, CA 92071     6. Signature of at least one person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signature:   Least One person responsible for forming the limited liability company:     Signat	Name	Address
6. Signature of at least one person responsible for forming the limited liability company: Signature: <u>Here</u> <u>Kimery</u> <u>Secretary of State use only</u> Typed Name: <u>Getry E. Kimery</u>	Gerry E. Kimery	1080 East 15th Street, Idaho Falls, ID, 83404
Signature: <u><u>Hur</u><u>Ce</u><u>Kimery</u><u>Secretary of State use only</u> Typed Name: <u>Getry E. Kimery</u></u>	Gene E. Kimery	9416 St. Andrews, Santee, CA 92071
Signature: <u>Muche</u> Kimery Secretary of State use only Typed Name: <u>Gerry E. Kimery</u>		
	Signature: <u>Dur Ce hun</u> Typed Name: <u>Gerry E. Kimery</u> Capacity: <u>Manager</u> Signature <u>Done Ce himen</u>	Secretary of State use only
Signature     Long     Line     IDAHO     SECRETARY     ID		

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