## FILED EFFECTIVE



Capacity:

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

( / <b>// )</b>	ORGANIZATION ILITY COMPANY back of application) company is:
(Instructions on	back of application)
The name of the limited liability	company is:
The street address of the initial	registered office is:
2105 Coronado Street, Idaho	Falls, ID 83404
and the name of the initial regist  Jarin O. Hammer	ered agent at the above address is:
. The mailing address for future co	orrespondence is:
3884 Taylorview Ln., Idaho Fa	alls, ID 83406
. Management of the limited liabil	ity company will be vested in:
Manager(s) v or Member(s	) [ (please check the appropriate box)
address(es) or at least one initia	n one or more manager(s), list the name(s) and all manager. If management is to be vested in the daddress(es) of at least one initial member.  Address
Terry Merrill	3884 Taylorview Ln., Idaho Falls, ID 83406
Debbie Merrill	3884 Taylorview Ln., Idaho Falls, ID 83406
,	
Signature of at least one persor	responsible for forming the limited liability company:
Signature: Terry Warrill	Secretary of State use only
Typed Name: Terry Merrill Capacity: Manager	IDAHO SECRETARY OF STATE USE UNITY
Capacity. Manager	SECRETARY OF S
Signature	
To a d Norman	기 년 100.00 = 100.00 ORG

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