

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

| | ARTICLES OF ORC | | FILED EFFECTIVE | |
|--|--|---|-----------------------------|--|
| F 70 | (Instructions on back of | of application) | SOUTH STORY | |
| 1. Ti | ne name of the limited liability compa | any is: | | |
| | Roi Construction/Remode ling, LLC | | | |
| - | 2. The street address of the initial registered office is: | | | |
| | 128 North Morningside Drive, Twin Falls, ID 83301 | | | |
| - | | | | |
| | and the name of the initial registered agent at the above address is: | | | |
| - | Eriberto Esquibel | | | |
| 3. T | The mailing address for future correspondence is: | | | |
| 128 North Morningside Drive, Twin Falls, ID 83301 | | | | |
| 4. N | Management of the limited liability company will be vested in: | | | |
| | Manager(s) ☐ or Member(s) ✓ (please check the appropriate box) | | | |
| n | ddress(es) of at least one initial man nember(s), list the name(s) and addr Name | ess(es) of at least one ini | tial member. Address | |
| | Eriberto Esquibel | 128 North Morningside | Drive | |
| | Eliberto Esquisor | Twin Falls, ID 83301 | | |
| | | (Will 1 alls, 1D 00001 | | |
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| 6. Signature of at least one person responsible for forming the limited liability company: | | | | |
| | gnature: | | Secretary of State use only | |
| | ped Name: Eriberto Esquibel | | continuit or come not only | |
| • | pacity: Member | #2 U# 0 10 | | |
| | | corplomatula formaterisologenization p85 Revieed 07/2002 | | |
| | gnature | LLC form | | |
| | /ped Name: | Pytomey | IDAHO SECRETARY OF STATE | |
| | apacity: | | 10/24/2005 05: | |