

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2007 MAR 19 AM 10:11

	(Instructions on bac	
1.	The name of the limited liability con	npany is: SEORETARY OF STATE OF IDAMO
	Roy Management LLC	
2.	The street address of the initial registered office is:	
	RR 1, Box 11E, Kooskia, ID 83539	
	and the name of the initial registere	d agent at the above address is:
2.1	Jarred Roy	
3.	The mailing address for future corre	espondence is:
	RR 1, Box 11E, Kooskia, ID 8353	•
4. 1	Management of the limited liability company will be vested in:	
	Manager(s) or Member(s) (please check the appropriate box)	
•	manago.(o) [
-5. I	If management is to be vested in on	e or more manager(s), list the name(s) and
E	address(es) of at least one initial ma	anager. If management is to be vested in the dress(es) of at least one initial member.
E	address(es) of at least one initial ma	anager. If management is to be vested in the
E	address(es) of at least one initial ma member(s), list the name(s) and add	anager. If management is to be vested in the dress(es) of at least one initial member.
E	address(es) of at least one initial ma member(s), list the name(s) and add Name	anager. If management is to be vested in the dress(es) of at least one initial member. Address
E	address(es) of at least one initial ma member(s), list the name(s) and add Name	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539
E	address(es) of at least one initial ma member(s), list the name(s) and add Name	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539
E	address(es) of at least one initial ma member(s), list the name(s) and add Name	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539
E	address(es) of at least one initial ma member(s), list the name(s) and add Name	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539
ř	address(es) of at least one initial mamember(s), list the name(s) and add Name Jarred Roy Tina M Roy	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539 RR 1, Box 11E, Kooskia, ID 83539
ř	address(es) of at least one initial mamember(s), list the name(s) and add Name Jarred Roy Tina M Roy	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539
6. S	Address(es) of at least one initial mamember(s), list the name(s) and adding the Name Jarred Roy Tina M Roy Signature of at least one person resignature:	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539 RR 1, Box 11E, Kooskia, ID 83539
6. S S	Address(es) of at least one initial mamember(s), list the name(s) and additional mamembers. Name Jarred Roy Tina M Roy Signature of at least one person resignature: Jarred Roy Jarred Roy	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539 RR 1, Box 11E, Kooskia, ID 83539 sponsible for forming the limited liability company: Secretary of State use only
6. S S	Address(es) of at least one initial mamember(s), list the name(s) and adding the Name Jarred Roy Tina M Roy Signature of at least one person resignature:	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539 RR 1, Box 11E, Kooskia, ID 83539
6. S T.	Address(es) of at least one initial mammember(s), list the name(s) and address Rame Name	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539 RR 1, Box 11E, Kooskia, ID 83539 sponsible for forming the limited liability company: Secretary of State use only
6. S T C	Address(es) of at least one initial mamember(s), list the name(s) and additional mamembers. Name Jarred Roy Tina M Roy Signature of at least one person resignature: Jarred Roy Jarred Roy	anager. If management is to be vested in the dress(es) of at least one initial member. Address RR 1, Box 11E, Kooskia, ID 83539 RR 1, Box 11E, Kooskia, ID 83539 sponsible for forming the limited liability company: Secretary of State use only

W60579