

ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2003 MAY 30 AM 8: 58

1.	The name of the limited liability comp	oany is:	SECRETARY OF STATE STATE OF IDAHO	
2.	The street address of the initial registered office is: 1536 E 400 N St.Anthony, Idaho 83445			
	and the name of the initial registered agent at the above address is: Neil L. Stoddard			
3.	The mailing address for future correspondence is: 1536 E 400 N 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) or 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		
	Neil L. Stoddard	Neil L. Stoddard 1536 E 400 N St.Anthon		
	Shelle Stoddard		00 N St.Anthony, Id 83445	
	Signature of at least one person responsible for forming the limited liability company:			
	Signature: Weil I Stoddard	ru	Secretary of State use only	
	Typed Name: Neil L. Stoddard Capacity: Manager Signature Lye Ltoddard Typed Name: Shelle Stoddard Capacity: Manager	<u>d</u>	IDAHO SECRETARY OF STATE 100 10	

W24437