

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 APR 24 AM 8:52

1.	The name of the limited liability comp	pany is:	STATE OF IDALIO	
2.	The street address of the initial regist	ered office is:		
	9706 WEST STATE STREET, STAR ID. 83669			
	and the name of the initial registered agent at the above address is: GREG MILLER			
3.	The mailing address for future correspondence is:			
	9706 WEST STATE STREET, STA	9706 WEST STATE STREET, STAR ID. 83669		
4.	Management of the limited liability co	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 member.			
	Name Address		ess	
	GREG MILLER	17381 COPPER SPUR AVE.NAMPA, ID 83687		
	DEBRA MILLER SAME AS ABOVE			
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6.	Signature of at least one person response	onsible for forming the limited	liability company:	
	Signature:	Secre	tary of State use only	
	Typed Name: GREG MILLER Capacity: OWNER	formstartsoforgentzation p65 Revised 07/2002		
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	Signature Shill	C.formst.	IDAHO SECRETARY OF STATE KU	
	Typed Name: DEBRA MILLER Capacity: OWNER	Revised 07/2002	04/25/2006 05:00 CK: 1518 CT: 199522 BH: 951103 1 0 100.00 = 100.00 ORGAN LLC #	
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