

## ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 JUL | | AM 8:41

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1.	The name of the limited liability compa	any is:	SECRETARY OF STATE STATE OF IDAHO	
2.	The street address of the initial registered office is:  1350 AMBER DRIVE, MTN. HOME, ID 83647			
	and the name of the initial registered agent at the above address is:  TRACI L. COLTON			
3.	The mailing address for future correspondence is:  P.O. BOX 1143, MOUNTAIN HOME, ID 83647			
4.	Management of the limited liability company will be vested in:  Manager(s) or Member(s) (please check the appropriate box)			
5.	f 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	Add	iress	
	TRACI L. COLTON1350 AMBER DRIVE, MOUNTAIN HOME, IDJOHN L. COLTON1350 AMBER DRIVE, MOUNTAIN HOME, ID		UNTAIN HOME, ID	
			UNTAIN HOME, ID	
6. Signature of at least one person responsible for forming the limited liability con			d liability company:	
	Signature: TRACIL COLTON	Sec.	retary of State use only	
	Typed Name: TRACI L. COLTON Capacity: OWNER/MEMBER  Signature JOHN L. COLTON Capacity: MEMBER	Scribbarnak LLC forms lartsoforganization p88 Revised 07/2002	IDAHO SECRETARY OF STATE 07/11/2006 05:00 CK: 1688 CT: 202246 BH: 964342 8 100.00 = 100.00 ORGAN LLC 8	