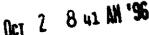
ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

To the Secretary of State of Idaho, Statehouse, Boise, Idaho 83720





SECRETARY OF STATE

The name of the limited liability company	s: Impla	-Tach Mf	g.,	L.L.C	•			
Idaho Falls, ID 83401	(100 8 7 0 0	~~,			initial r	egiste	ered	
agent at that address is: Rick L. Koste	er							
Signature of registered agent :	h,	<u>slul</u>						
The latest date certain on which the limited	liability c	ompany w	ill dis	ssolve:_	12/31,	/2046	<u>-</u>	
Is management of the limited liability comp	oany veste No (che	d in a man	ager ^{ox)}	or man	agers?	I		
least one initial manager. If management i address(es) of at least one initial member.	is vested i	n the mem	bers	(s) and a , list the	address name(s	(es) o s) and	fat	
	1800 N	. Woodru	ff,	Idaho	Falls	, ID	834	ŀ
Daniel R. DeLeon					3		1	
Signature of at least one person listed in a Damiy R D. 7	#5 above		2	DATE 10	100H0 SECR 1/02/1996 5547 ORGA	0900 Custo In L.L	1880 -C	
	The address of the initial registered office in Idaho Falls, ID 83401 agent at that address is: Rick L. Koster Signature of registered agent: The latest date certain on which the limited is management of the limited liability compound Yes If management is vested in one or more management is vested in one or more management address(es) of at least one initial member. Name: Rick L. Koster Daniel R. DeLeon Signature of at least one person listed in a second content of the initial member.	The address of the initial registered office is: 1800 (not a POB Idaho Falls, ID 83401) agent at that address is: Rick L. Koster Signature of registered agent: Rick L. Koster The latest date certain on which the limited liability of Is management of the limited liability company vester Yes No (check If management is vested in one or more manager(s) least one initial manager. If management is vested in address(es) of at least one initial member. Name: Rick L. Koster 1800 N. Daniel R. DeLeon 1800 N. Signature of at least one person listed in #5 above: Rick L. Koster 1800 N.	The address of the initial registered office is: 1800 N. Woodry Idaho Falls, ID 83401 and the agent at that address is: Rick L. Koster Signature of registered agent: The latest date certain on which the limited liability company with ls management of the limited liability company vested in a manner of the limited liability company vested in the limited liability company vested in the limited liability company vested in the limite	The address of the initial registered office is: 1800 N. Woodruff Idaho Falls, ID 83401 and the nam agent at that address is: Rick L. Koster Signature of registered agent: Place L.	The address of the initial registered office is: 1800 N. Woodruff Idaho Falls, ID 83401 and the name of the agent at that address is: Rick L. Koster Signature of registered agent: The latest date certain on which the limited liability company will dissolve: Is management of the limited liability company vested in a manager or man Yes No (check appropriate box) If management is vested in one or more manager(s), list the name(s) and a least one initial manager. If management is vested in the members, list the address(es) of at least one initial member. Name: Address: Rick L. Koster 1800 N. Woodruff, Idaho Signature of at least one person listed in #5 above: Daniel R. DeLeon 1800 N. Woodruff, Idaho Signature of at least one person listed in #5 above: Daniel R. DeLeon 1800 N. Woodruff, Idaho	and the name of the initial of agent at that address is: Rick L. Koster Signature of registered agent: The latest date certain on which the limited liability company will dissolve: The latest date certain on which the limited liability company will dissolve: Yes No (check appropriate box) If management is vested in one or more manager(s), list the name(s) and address least one initial manager. If management is vested in the members, list the name(s) address(es) of at least one initial member. Name: Address: Rick L. Koster Daniel R. DeLeon 1800 N. Woodruff, Idaho Falls Signature of at least one person listed in #5 above. Part I Woodruff, Idaho Falls Signature of at least one person listed in #5 above. Secretary of State use only inwested in the members of the initial manager. Rick L. Koster Daniel R. DeLeon Secretary of State use only inwested in #5 above. Part I Woodruff, Idaho Falls ORGE	The address of the initial registered office is: 1800 N. Woodruff Idaho Falls, ID 83401 and the name of the initial register agent at that address is: Rick I., Koster	The address of the initial registered office is: 1800 N. Woodruff Idaho Falls, ID 83401 and the name of the initial registered agent at that address is: Rick L. Koster Signature of registered agent: D. L. Koster The latest date certain on which the limited liability company will dissolve: 12/31/2046 Is management of the limited liability company vested in a manager or managers? Yes No (check appropriate box) If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial member. Name: Address: Rick L. Koster 1800 N. Woodruff, Idaho Falls, ID 8340 Signature of at least one person listed in #5 above. Daniel R. DeLeon 1800 N. Woodruff, Idaho Falls, ID 8340 Signature of at least one person listed in #5 above. Daniel R. Deleon 1800 N. Woodruff, Idaho Falls, ID 8340 Signature of at least one person listed in #5 above. Daniel R. Deleon 1800 N. Woodruff, Idaho Falls, ID 8340 Signature of at least one person listed in #5 above. Daniel R. Deleon 1800 N. Woodruff, Idaho Falls, ID 8340 Signature of State use only 1800 N. Woodruff, Idaho Falls, ID 8340 Daniel N. Woodruff, Idaho Falls, ID 8340 Signature of State use only 1800 N. Woodruff, Idaho Falls, ID 8340 Daniel N. Woodruff, Idaho Falls, ID 8340 Signature of State use only 1800 N. Woodruff, Idaho Falls, ID 8340 Daniel 1900 N. Woodruff, Idaho Falls, ID 8340