

ARTICLES OF ORGANIZATION I IMITED LIABILITY COMPANY

Crson

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| | (Instructions on back of a 15-15) | 2005 AUG 22 AM 9:5 |
|----|--|---|
| 1 | (Instructions on back of application) | SECRETARY OF STATE |
| 1. | The name of the limited liability company is: | SECHETANT OF 10/140 |
| | ZAMJJAC LLC | 000- |
| 2. | The street address of the initial registered office is: | |
| | 889 Twin Botts Rond MENAN Jd. | 83434 |
| | and the name of the initial registered agent at the above address is: | Cathy To A |
| | BEG TOLOGO BOTTO DO ON ONTONON TON | 1 ABABAH |
| 3. | The mailing address for future correspondence is: | |
| | 889 Twin Butte Road Menar | 1, 1D83434 |
| 4. | lanagement 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 na address(es) of at least one initial manager. If management is to be vested in one or more manager and address(es) of at least one initial member(s), list the name(s) and address(es) of at least one initial members. | ested in the ember. |
| | Name Addres | |
| | Cathy Jo Anderson 889 Twin Both R | and Menan Id. |
| | | 83434 |
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| ^ | | |
| | Signature of at least one person responsible for forming the limited l | ability company: |
| | Secretar | y of State use only |
| | Capacity: MAWAGET | |
| | 2 Martscfor | IDAHO SECRETARY OF STATE |
| | Typed Name: CATHY TO HNDERSON Capacity: | /22/2005 05:00 : 1 CT: 191549 BH: 907407 |
| ا | Typed Name: | 100.00 = 100.00 ORGAN LLC # 2 20.00 = 20.00 CORP SUR # 3 |
| (| Japacity. | om mae == om mar fxpfdiie i#4 |

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