FILED EFFECTIVE

251

|--|

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY "MILL JAM -8 PH 2: 25

Blue Shadow Timber Frame LLC 2. The street address of the initial registered office is: 4220 S. 5th W., Idaho Falls, ID 83404 and the name of the initial registered agent at the above address is: James D. Lingo 3. The mailing address for future correspondence is: Same 4. Management of the limited liability company will be vested in: Manager(s) v 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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404 6. Signature of at least one person responsible for forming the limited liability compassion of the limited l		(Instructions on back		
and the name of the initial registered agent at the above address is: James D. Lingo 3. The mailing address for future correspondence is: Same 4. Management of the limited liability company will be vested in: Manager(s) v 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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404	1.		ipany is:	
James D. Lingo 3. The mailing address for future correspondence is: Same 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) 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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404	2.			
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) 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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404			agent at the above address is:	
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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404	3.	- · · · · · · · · · · · · · · · · · · ·	spondence is:	
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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404 6. Signature of at least one person responsible for forming the limited liability compa	4.	Management of the limited liability co	ompany will be vested in:	
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 James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404 6. Signature of at least one person responsible for forming the limited liability compa		Manager(s) v or Member(s)	(please check the appropriate box)	
James D. Lingo 4220 S. 5th W, Idaho Falls, Idaho 83404 6. Signature of at least one person responsible for forming the limited liability compa	5.	address(es) of at least one initial manager. If management is to be vested in the		
6. Signature of at least one person responsible for forming the limited liability compa		Name	Address	
Signature: State lise pol		James D. Lingo	4220 S. 5th W, Idaho Falls, Idaho 83404	
Signatura: Secretary of State lies pol				
Signatura: Secretary of State lies pol				
Signatura: State list roll				
Signatura: State lise pol		, ,	/	
Signature: Typed Name: James D. Lingo Capacity: Owner Signature Typed Name:		/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	pensible for forming the limited liability company:	
Capacity: Owner Signature			Secretary of State use only	
Signature Typed Name: IDANO SECRETA			a page	
Typed Name:		Signature :	2000 2000	
Conscitut IDANO SECRETA			inmail Co.	
Capacity. 9 01/08/20		Capacity:	IDANO SECRETARY OF STATE 91/98/2094 95: Web Form CK: 1822385866NJO CT: 172899 BH	

1 0 100.00 = 100.00 ORGAN LLC # 2

W27848