



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

RECEIVED
JAN 24 2005 10:15
STATE OF IDAHO

1. The name of the limited liability company is:

WCPM, LLC

2. The street address of the initial registered office is:

1504 E. PLAZA, POST FALLS, ID 83854

and the name of the initial registered agent at the above address is:

LEONARD O WALLACE

3. The mailing address for future correspondence is:

1504 E. PLAZA, POST FALLS, ID 83854

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
<u>LEONARD O WALLACE</u>	<u>1504 E. PLAZA, POST FALLS, ID 83854</u>
_____	_____
_____	_____
_____	_____
_____	_____

6. Signature of at least one person responsible for forming the limited liability company:

Signature:

Typed Name: DONALD J GARY, JR

Capacity: ATTORNEY/ORGANIZER

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

g:\corp\forms\llc\forms\articlesoforganization p65
Revised 07/2002

IDAHO SECRETARY OF STATE
01/24/2005 05:00
CK: 6223 CT: 185437 BH: 788729
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 36104