

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY AUG -3 A 8: 44

	(mstructions on ba	sck or application) STATE STATE  STATE: OF IDAHO
	of the limited liability co	STATE: OF IDAHU  mpany is:
	address of the initial rec	
and the na Kevin Ke		ed agent at the above address is:
	g address for future cornerland Rd. Boise, 10	respondence is:
4. Managem		company will be vested in:  (please check the appropriate box)
address(e:	s) of at least one initial m	ne or more manager(s), list the name(s) and nanager. If management is to be vested in the ddress(es) of at least one initial member.
	Name	Address
Kevin Ke	nnedy	12965 W. Paint Dr. Boise, ID 83713
Ben Tolman Aaron Fuhriman		6288 S. Universal Ave. Boise, ID 83709
		6291 S. Eclipse Pl. Boise, ID 83709
Krista Cro	omar	3099 W. Wilder Ct. Meridian ID 83642
Signature:		sponsible for forming the limited liability company:
Typed Name		Secretary of State use only
Capacity: O	E Kevin Kennedy	Secretary of State use only    1