

ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

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<u> </u>	(11/38/408/01/00/104/01/0	ri migri		STATE
Т	he name of the limited liability compa	any is:		STATE OF IDAHO
	MD4 Land, LLC			
י. ד	he street address of the initial registe	ered office is:		
	6755 Cochrane Drive, Meridian ID			
á	and the name of the initial registered a		ove addre	ss is:
	Andrea Pogue			
3. ⁻	The mailing address for future corresp	pondence is:		
J.	6755 Cochrane Drive, Meridian ID			
4	Management of the limited liability co		vested in:	
				box)
	Manager(s)	•		
	If management is to be vested in one address(es) of at least one initial mar member(s), list the name(s) and addi	nager. It mana	gementis	fo be vezred in the
	Name			Address
		6755 Cochr	ane Drive	Meridian ID 83642
	Andrea Pogue	0100 000111	<u> </u>	
		 		
		. <u></u>		
6.	Signature of at least one person resp	ponsible for for	rming the i	imited liability company:
Ψ.	Signature: Andrea Vosa	re		Secretary of State use only
	Typed Name: Andrea Pogue		iization p	
	Capacity: member (wife)	· · · · · · · · · · · · · · · · · · ·	soforgar	
	Signature	~~_	forms/art	IDAHO SECRETARY OF 12/19/2003
	Typed Name: Bryan Pogue		corpytoms/LC frimskartsoforganization pd5 Revised 07/2002	CK: 1165 CT: 114467 1 0 100.00 = 100.00 0
	Capacity: member (husband)		Compile R	