



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY FILED/EFFECTIVE

(Instructions on back of application)

01 DEC 17 AM 9:15

1. The name of the limited liability company is: The Pony Connection L.L.C.
SECRETARY OF STATE
STATE OF IDAHO

2. The address of the initial registered office is: 3245 S. 55th W. Idaho Falls, ID 83402
_____ and the name of the initial registered agent at that address is: Julie Sherwood

3. The mailing address for future correspondence: 3245 S. 55th W. Idaho Falls, ID 83402

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 members, list the name(s) and address(es) of at least one initial member.

<u>Name</u>	<u>Address</u>
Julie Sherwood	3245 S. 55th W. Idaho Falls, ID 83402
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

Signature Julie Sherwood

Typed Name Julie Sherwood

Capacity Manager

Signature _____

Typed Name _____

Capacity _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
12/17/2001 05:00
CK: 3247 CT: 154656 BH: 434792
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