

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

03 JUN -2 PM 1:18

SECRETARY OF STATE

| 1. | The name of the limited liability comp C-lo Develop | ment, LLC. | |
|----|---|---|--|
| 2. | The street address of the initial regist | · | |
| | 2011 N. Locus | of Grove Meridian, ID834 | |
| | and the name of the initial registered | agent at the above address is: | |
| | Jake Center | `S | |
| 3. | The mailing address for future correspondence is: | | |
| | 2011 N. Locust | + Grove Meridian, ID 83642 | |
| 4. | Management of the limited liability company will be vested in: | | |
| | Manager(s) or Member(s) | (please check the appropriate box) | |
| 5. | address(es) or at least one initial mar | dress(es) or at least one initial manager. If management is to be vested in the mber(s), list the name(s) and address(es) of at least one initial member. | |
| | Name | Address | |
| | Jake Centers | 2011 N. Locust Grove, | |
| | | Meridian, ID 83642 | |
| | | 170101011 | |
| | | | |
| | | | |
| | | | |
| | | | |
| 6. | Signature of at least one person resp | onsible for forming the limited liability company: | |
| | Signature of at least one person responses | onsible for forming the limited liability company: | |
| | Signature of at least one person responses Signature: | onsible for forming the limited liability company: | |
| | Signature of at least one person responses | onsible for forming the limited liability company: | |
| | Signature of at least one person responses Signature: | onsible for forming the limited liability company: | |
| | Signature of at least one person response Signature: Typed Name: Take Cente Capacity: Member | Secretary of State use only | |