## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

03 JUN - 3 FH 2: 25

1.	The name of the limited liability compa	any is:	SECH. STATE STATE LE IDAHO	
2.	The street address of the initial registered office is:  3832 E. Sweet Pea Ct Boise, ID 83716			
	and the name of the initial registered agent at the above address is:  Joel Chapman			
3.	The mailing address for future correspondence is:  3832 E. Sweet Pea Ct Boise ID 83716			
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	Ado	iress	
	Joel Chapman	3832 E. Sweet PEA Ct. Boise, ID 83714		
	JAMIE Chapman			
	Jillie Char			
			· · · · · · · · · · · · · · · · · · ·	
6.	6. Signature of at least one person responsible for forming the limited liability company:			
	Signature:		retary of State use only	
	Typed Name: Joel Chapman	kzalton, p85		
	Capacity: Owner/Manager			
	Signature Co	comstart		
	Typed Name: Jamie Chapman	formstarteolory Revised 07/2002	IDAHO SECRETARY OF STATE	
	Capacity: Co-owner/manager	Reg	06/03/2005 05:00 CK: 836 CT: 189374 BH: 814128	

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