

ARTICLES OF ORGANIZATION ED/EFFECTIVE LIMITED LIABILITY COMPANY APR 18 All 9:58

(Instructions on back of application)

STATE OF STATE

	UF IDAHA
The name of the limited liability of	company is: Jackpine Enterprises, I.I.C.
The street address of the initial reg	pistered office is: 5 West 50 South, P.O. Box 3
Driggs, Idaho 83422	and the name of the initial registered
agent at the above address is:	Keith I. Birch
The mailing address for future corre	espondence: Jackpine Enterprises, I.I.C.
P.O. Box 3 Driggs, Idaho	
Management of the limited liability	
	1
Manager(s) To or Member(s).	. (please check the appropriate box)
If management is to be vested in or	ne or more manager(s), list the name(s) and address(es) of
at least one initial manager. If mana address(es) of at least one initial m	agement is to be vested in the members, list the name(s) and
Name	Address
	<u> </u>
Keith L. Birch	5 West 50 South, P.O.Box 3, Driggs, Idaho
	4
Signature of at least one person resi	ponsible for forming the limited liability company:
Signature / //	
Typed Name Keith I. Birch	- <u>/-</u>
Capacity President / Mana	Secretary of State use only
Signature Ausan P. B.	reh)
Typed Name Susan S. Birch	
	Comment of the commen
Capacity Secretary / Mana	ger Ger

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