

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

05 JUL 14 PM 3: 55

1.	The name of the limited liability comp	any is:	SECRETARION STATE STATE OF IDAHO
2.	The street address of the initial registed 1045 S. Ancona Ave. Ste 140, Eagl		
	and the name of the initial registered a	agent at the above address	is:
3.	The mailing address for future correspondence is: 1045 S. Ancona Ave. Ste 140, Eagle, ID 83616		
4.	Management of the limited liability company will be vested in:		
,	Manager(s) or Member(s)	(please check the appropriate box)	
<b>5</b> .	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.		
	••		dress
	Name	Ad	uress
	Shannon Robnett	1045 S. Ancona Ave. Ste	
;	Signature of at least on the sports of the s	1045 S. Ancona Ave. Ste	140, Eagle, ID 83616
	Signature of at least on the special state of the s	1045 S. Ancona Ave. Ste	140, Eagle, ID 83616  d liability company:
•	Signature of at least one berson responsible to the state of the state	1045 S. Ancona Ave. Ste	140, Eagle, ID 83616