

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY

<u> </u>	(Instructions on back	
1.	The name of the limited liability comp	oany is:  SEGN. STATE CONTROL STATE
2.	The street address of the initial regist 2157 Highway 95 North, Council, Id	
	and the name of the initial registered and Rodman Barker	agent at the above address is:
3.	The mailing address for future corresp P.O. Box 129, Council, Idaho, 8361	
4.	Management of the limited liability con Manager(s)	, , , , , , , , , , , , , , , , , , ,
<ol> <li>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.</li> </ol>		
	Name	Address
	Rodman Barker	P.O. Box 129, Council, Idaho, 83612
	Sherril Barker	P.O. Box 129, Council, Idaho, 83612
6.	Signature of at least one person response	onsible for forming the limited liability company:
	Signature:	Secretary of State use only
	Typed Name: Rodman Barker	nization p
<u>.</u>	Capacity: Member  Signature A Level Bav  Typed Name: Sherril Barker  Capacity: Member	CK: 4964 CT: 2582 BH: 932526 1 9 100.00 = 100.00 DRGAN LLC #

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