ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANIZATION 9: 10

(Instructions on back of application) STATE OF IDAHO

| 1. | The name of the limited liability company is: Smoot Enterprises, LLC | |
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| 2. | The address of the initial registered office is: 466 12th Street, Idaho Falls, ID 83404 and the name of the initial registered | |
| | agent at that address is: Mark Smoot | and the matter of the militar regional of |
| 3. | | ce: 466 12th Street, Idaho Falls. |
| 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 members, list the name(s) and address(es) of at least one initial member. Name Address | |
| | Mark Smoot | 466 12th Street |
| | | Idaho Falls, ID 83404 |
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| | | |
| 6. | Signature of at least one person responsible | for forming the limited liability company: |
| | Smoot Enterprises, LLC | |
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