

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2004 OCT 12 AM 9: 56

1.	The name of the limited liability compa	Iny is: STATE OF 10 AHO
2.	The street address of the initial registered office is: 75 CLARK AVE. FISH HAVEN, ID 83287	
	and the name of the initial registered a DAVID LONGFELLOW	gent at the above address is:
3.	The mailing address for future correspondence is: PO BOX 115 FISH HAVEN, ID 83287	
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	Address
	DAVID LONGFELLOW	75 CLARK AVE. FISH HAVEN, ID 83287
	VANESSA LONGFELLOW	75 CLARK AVE. FISH HAVEN, ID 83287
6. Signature of at least one person responsible for forming the limited liability company: Signature: Secretary of State use only		
Capacity: MANAGER		
	Signature (Quesse to you	OW IDAHO SECRETARY OF STATE 10/12/2004 05:00
	Typed Name: VANESSA LONGFELL	OW IDAHO SECRETARY OF STATE 10/12/2004 05:00 10/12/2014 05:00
	Capacity: MEMBER	CK: 261971379 CT: 162652 BH: 77879

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