

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY 2003 JUL 17 AM 9: 25

<u> </u>	(Instructions on back	k of application	on)	
1.	The name of the limited liability company is:		STATE OF IDAHO	
	SARATOGA HOLDINGS, LLC			~
2.	The street address of the initial registered office is:			
	3400 MERLIN DRIVE, IDAHO FALLS, ID 83404			
	and the name of the initial registered agent at the above address is:			
	MICHAEL COLVIN			
3.	The mailing address for future correspondence is:			
	PO BOX 51568, IDAHO FALLS, ID 83405			
4.	Management of the limited liability company will be vested in:			
	Manager(s) or Member(s) (please check the appropriate box)			
	If management is to be vested in one or more manager(s), list the name(s) and address(es) or 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			
	MICHAEL COLVIN	PO BOX	51568, IDA	HO FALLS, ID 83405

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6.	Signature of at least one person resp	onsible for fo	orming the l	imited liability company:
	Signature: Multiply 7	-3-03	: <u>8</u>	Secretary of State use only
	yped Name: MICHAEL COLVIN		ization.p	
(Capacity: MANAGER		plioms/LLC forms/artsoforganization p65 Revised 07/2002	•
S	ignature		Cforms\ar	IDAHO SECRETARY OF STATE
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