

ARTICLES OF ORGANIZATION EFFECTIVE LIMITED LIABILITY COMPAN FILED EFFECTIVE

	(Instructions on back		SECRETARY OF STATE STATE OF IDAHO
	me of the limited liability comp	oany is:	STATE OF IDAHO
	eet address of the initial regist V. Appleway, Suite 10, Coeur		
	e name of the initial registered A. Carling	agent at the above address is	5 :
	ailing address for future corres V. Appleway, Suite 10, Coeur		
4. Manag	ement of the limited liability co	mpany will be vested in:	
Manag	er(s) v or Member(s)	(please check the appropriate box)	
5. If mana addres	agement is to be vested in one is(es) of at least one initial marer(s), list the name(s) and addi	nager. If management is to be	vested in the member.
5. If mana addres membe	es(es) of at least one initial mar er(s), list the name(s) and add	nager. If management is to be ress(es) of at least one initial r	vested in the member.
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