

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY FILE OF FECTIVE

(Instructions on back of application)

2002 MAY 30 AM 9: 00

1.	The name of the limited liability company is: Middle STATE STATE OF IDAHO
2.	The street address of the initial registered office is: <u>All Piver Run Drive</u>
	Ketchum. ID 83340 and the name of the initial registered
	agent at the above address is: MATT LEIDECKER
3.	The mailing address for future correspondence: P.o. Box 3834 Ketchum, ID
	83340
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
	MATT LEIDECKER P.O. Box 3834 Ketchum, ID 83340
6.	Signature of at least one person responsible for forming the limited liability company:
	Signature <u>Matt Lecialul</u>
	Typed Name MATT LEIDECKER Secretary of State use only
	Capacity Managing Member
	Signature
	Typed Name
	Typed Name MATT LEIDECKER Capacity Managing Member Signature Typed Name Typed Name Capacity Of State use only IDAHO SECRETARY OF STATE CAPACITY CAPA

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