

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on back of application)  The name of the limited liability company is:	0, 0.5
1.	The name of the limited liability company is:  St. Joe Arms, LLC	0446ATE
2.	The street address of the initial registered office is:	
	14597 St. Joe River Road, St. Maries, Idaho 83861	
;	and the name of the initial registered agent at the above address is:	
	Bonnie Scott	
<b>3</b> . '	The mailing address for future correspondence is:	
	14597 St. Joe River Road, St. Maries, Idaho 83861	
4.	The limited liability company will be:	
1	Manager-managed or Member-managed (please check the appropriate bo	x)
	If manager-managed, list the name(s) and address(es) of at least one initial number-managed, list the name(s) and address(es) of at least one initial managed.	_
	Name Address	CITIDOT.
	Bonnie Scott 14597 St. Joe River Road, St. Maries, I	D 83861
		<del></del>
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6	Signature of at least one person responsible for forming the limited liability co	mpany:
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	Signature: Secretary of State use of	niy
	Typed Name: Bonnie Scott	
C	Capacity: Member	7,60
_	TOO TOO	160
	Signature IDAHO SEC	RETARY OF ST
	Typed Name:   ## CK: 7540 FT.	18414 BH: 00.06 ORGA
C	Capacity:	ov. We ORGA