

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
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1. The name of the limited liability co	ompany is:	SECRETARY OF STATE STATE OF IDAHO
Laurel Group, LLC		STATE OF IDATIO
2. The street address of the initial reg	ristered office is:	
223 N. 6th Street, Suite 425, Bois		
and the name of the initial register		addrae is
Michael J. Swope	su agent at the above	address is:

3. The mailing address for future corr	espondence is:	
223 N. 6th Street, Suite 425, Bois	e, Idaho 837802	
4. The limited liability company will be):	
Manager-managed 🗸 or Memb	er-managed 🦳 👍	lease check the appropriate box)
If manager-managed, list the name If member-managed, list the name	(s) and address(es) o	f at least one initial manager.
Name	(b) and address(es) of	Address
		CMMIUSS.
Michael J. Swope	223 N. 6th St., Suit	e 425, Boise, ID 83702
6. Signature of at least one person re-	sponsible for forming	the limited liability company:
	X	7 , , , .
Signature: 4 My	1	Secretary of State use only
Typed Name: Michael J. Swope	izzato	
Capacity: Manager		
Signature	makarti 72007	IDAHO SECRETARY OF STATE
Typed Name:	1 44 -	11/07/2007 05:00 CX: 55152 CT: 67242 BH: 108442
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