

Capacity:

## ARTICLES OF ORGANIZATION

ARTICLES OF OR	GANIZATION TY COMPANY Of application)  SECRETARY
(Instructions on back of	TY COMPANY  SECRETARY  STATES
The name of the limited liability compa  Yellowstone Log Homes of Bear La	any is: STATE OF STATE
2. The street address of the initial registe	
652 Maple Drive Fish Haven, Idah	o 83287
and the name of the initial registered a	agent at the above address is:
3. The mailing address for future corresp	oondence is:
652 Maple Drive Fish Haven, ID 8	
Management of the limited liability con	npany will be vested in:
Manager(s) or Member(s)	(please check the appropriate box)
	or more manager(s), list the name(s) and ager. If management is to be vested in the ess(es) of at least one initial member.
Name	Address
Name  Laurie Harrison	Address 652 Maple Drive Fish Haven, ID 83287
Laurie Harrison	652 Maple Drive Fish Haven, ID 83287
Laurie Harrison	
S. Signature of at least one person respo	onsible for forming the limited liability company:
Signature of at least one person responsibilities of a le	onsible for forming the limited liability company:
S. Signature of at least one person respo	onsible for forming the limited liability company:
Laurie Harrison  Signature of at least one person responsion for the state of the s	onsible for forming the limited liability company:  Secretary of State use only
Laurie Harrison  Signature of at least one person responsion for the survey of the sur	onsible for forming the limited liability company:  Secretary of State use only

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