

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

PILED EFFEC.

(Instructions on back of application)

2005 NOV 23 AM 9: 10

1.	The name of the limited liability complete liabilit	SECRETARY OF STATE STATE OF IDAHO	
2.	The street address of the initial registered office is:     6900 Brown Lane, Nampa, ID. 83686		
	and the name of the initial registered Gary Hale	agent at the above address is:	
3.	The mailing address for future correspondence is: 6900 Brown Lane, Nampa, ID. 83686		
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 member(s), list the name(s) and address(es) of at least one initial member.		
	Name	Address	
	Gary Hale	6900 Brown Lane, Nampa, ID. 83686	
6. Signature of at least one person responsible for forming the limited liability company:  Signature: Secretary of State use only			
-	Гуреd Name: Gary Hale	8	
(	Capacity: Managing Member		
-	Signature  Typed Name:  Capacity:	♥ ♥	

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