



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

07 APR 20 AM 8:29

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Experiential Adventures, LLC

2. The street address of the initial registered office is:

1816 West Donald Circle, Boise, ID 83706

and the name of the initial registered agent at the above address is:

Mat Erpelding

3. The mailing address for future correspondence is:

1802 North 26th Street, Boise, ID 83702

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
<u>Mat Erpelding</u>	<u>1816 West Donald Circle, Boise, ID 83706</u>
<u>Geoff Harrison</u>	<u>1802 North 26th Street, Boise, ID 83702</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: Mat Erpelding
 Typed Name: Mat Erpelding
 Capacity: Manager

Signature: Geoff Harrison
 Typed Name: Geoff Harrison
 Capacity: Manager

Secretary of State use only

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 Revised 07/2002

IDAHO SECRETARY OF STATE
 04/20/2007 05:00
 CK: 1120696 CT: 172099 BH: 1040447
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