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## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
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•	The name of the limited liability compa	any is:	SECRETATION OF STATE STATE OF IDAHO
2.	The street address of the initial registered office is:  16900 S. Curtis Road, Kuna, Idaho 83634		
	and the name of the initial registered a	agent at the abo	ove address is:
<b>.</b>	The mailing address for future correspondence is:  16900 S. Curtis Road, Kuna, Idaho 83634		
	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) or 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		
	Greg Clark	16900 S. Curtis Road	
		Kuna, Idaho 83634	
3.	Signature of afficient one person resp	onsible for form	ning the limited liability company:
	Signature: May May ( Lun		Secretary of State use only
	Typed Name: Gred Clark		
	Capacity: Member	poologani	
	Signature	LLC forms/arts	IDAHO SECRETARY OF STATE    05/27/2005 05:0   CK: 5630 CT: 64568 BH: 81314   1 0 190.00 = 100.00 ORGAN LLC
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