

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

03 DEC -1 AM 10: 48

SECRETARY OF STATE

| 1. | The name of the limited liability com | pany is: |
|----|---|--|
| | Joseph D. Stallings Insurance, L.L | C. |
| 2. | The street address of the initial registered office is: | |
| | and the name of the initial registered agent at the above address is: | |
| | | |
| | Mr. Joseph D. Stallings | |
| 3. | The mailing address for future correspondence is: | |
| | 13125 West Persimmon Lane, Ste. 150 Boise, Idaho 83713 | |
| 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 |
| | Joseph D. Stallings | 13125 West Persimmon Lane, Ste. 150 |
| | | Boise, Idaho 83713 |
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| | 1 1 1 1 | onsible for forming the limited liability company: |
| ; | Signature: | Considerated of State and additional additional and additional add |
| ; | Signature: | Considerated of Chale |
| | Signature: — Property of D. Stallings Capacity: Member | Consider of Class of the Consideration |
| | Signature: | Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 12/01/2003 |

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