

**ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2003 AUG 12 A 8:18
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is: **CODY, L.L.C.**
2. The address of the initial registered office is: **126 2nd Ave. N., Twin Falls, ID 83301**
(not a P.O. Box)
and the name of the initial registered agent at that address is: **J. Robert Alexander.**
3. The mailing address for future correspondence: **5050 South Yellowstone Highway, Idaho Falls, ID 83402.**
- 4.
5. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)
5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

Name:

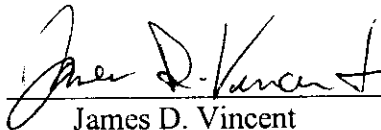
Address:

James D. Vincent

**5050 South Yellowstone Highway
Idaho Falls, ID 83402**

6. Signature of at least one person responsible for forming the limited liability company:

Signature



James D. Vincent

Capacity:

Member/Manager

W25498
IDAHO SECRETARY OF STATE
08/12/2003 05:00
CK: 31139 CT: 2853 DH: 695951
1 @ 100.00 = 100.00 ORGAN LLC # 2