

## ARTICLES OF ORGANIZATION LED EFFECTIVE LIMITED LIABILITY COMPANY

2005 APR 25 (A110: 09

(Instructions on back of application)

| 1. | The name of the limited liability company is:  |   |  |
|----|--|---|--|
|    | Cornerstone Building Construction  | LLC   |  |
| 2. | The street address of the initial registered office is:  |   |  |
|    | 2105 Coronado Street, Idaho Falls, ID 83404  |   |  |
|    | and the name of the initial registered agent at the above address is:  |   |  |
|    | Jarin O. Hammer  |   |  |
| 3. | The mailing address for future correspondence is:  |   |  |
|    | 1002 N 1000 E, Shelley, ID 83274   |   |  |
| 4. | 4. Management of the limited liability company will be vested in:  |   |  |
|    | Manager(s) v or Member(s)  | (please check the approp  | oriate box)  |
| 5. | f 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 nember(s), list the name(s) and address(es) of at least one initial member. |   |  |
|    | Name   |   | Address  |
|    | Lance William Holtz  | 1002 N 1000 E, Shelley, ID 83274                                |  |
|    |  |   |  |
|    |  | 1100  |  |
|    |  | -   |  |
|    |  |   |  |
|    |  |   |  |
| 6  | Signature of at least one name.  |   |  |
| ס. | Signature of at least one person respo   |   |  |
|    | Signature.   |   |  |
|    | Typed Name: Jarin O. Hammer  | 9d 100  | Secretary of State use only  |
| -  | - V  | organization.p65  | Secretary of State use only  |
| (  | Typed Name: <u>Jarin O. Hammer</u><br>Capacity: <u>Organizer</u>   | ms:entsoforgan.zation p65                                       |  |
| (  | Typed Name: Jarin O. Hammer  | 9)corpidoms/LLC forms/entroforganization p65<br>Ravised 07/2002 | IDAHO SECRETARY OF STATE  O4/25/2005 05:00  CK: 2169 CT: 1681 BH: 886523 |