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ARTICLES OF ORGANIZATION TED LIABILITY COMPANY To the Secretary of State of Ideho Corporations Division 700 West Jefferson Room 205

P.O. Box 25720 • Boles, ID \$3720-0080

00 APR 28 AM 10: 04

STATE OF IDAHO 1. The name of the limited liability company is: 2. The address of the initial registered office is: and the name of the initial registered agent at that address is: THINSON Signature of registered agent : 3. The latest data certain on which the limited liability company will dissolve: 4. Is management of the limited liability company vested in a manager or managers? Yes NO (chast appropriate bad) 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: 621 EAST 100 SOWEN. - DANNO FORMS 6. Signature of at least one person listed in #5 above: OHNSON IDAHO SECRETARY OF STATE

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