



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 SEP 18 PH 2: 20

| | , | , , | SECRETARY OF STATE |
|----|---|---------------------------|---|
| 1. | The name of the limited liability com | pany is: | STATE OF IDAHO |
| | West Higan LLC | | W # IQ |
| 2. | The street address of the initial registered office is: 197 HOLIDAY DRIVE, GARDEN VALLEY, ID. 83622 | | |
| | | | |
| | and the name of the initial registered | l agent at the ab | ove address is: |
| | VAL JONES | agom at the as | 010 uda1033 is. |
| _ | | | |
| 3. | The mailing address for future correspondence is: | | |
| | 197 HOLIDAY DRIVE, GARDEN VALLEY, ID. 83622 | | |
| 4. | Management of the limited liability company will be vested in: | | |
| | Manager(s) or Member(s) (please check the appropriate box) | | |
| _ | 16 | | / |
| 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 | |
| | ROHAN ESTATES, FLP | 2764 LAKE SAHARA DR. #111 | |
| | | LAS VEGAS | NV 89117 |
| | | | |
| | | | |
| | | . A-Street | |
| | | | |
| | | | |
| 6 | Signature of at least one names reco | onoible for for- | sing the limited liability company |
| | Signature of at least one person respondence Signature. | | ing the inflited liability company: |
| | Typed Name: Dominic Catalano | Septra Septra | Secretary of State use only |
| | Capacity: President of GP | | |
| | | projonia | IDAHO SECRETARY OF STATE |
| 5 | Signature | ormexLCformat | 09/18/2006 05: 9 CK: 1167 CT: 193126 BH: 9757 1 0 188.08 = 188.08 GRGAN LLC |
| | Typed Name: | - Indiana | 1 0 188.00 = 109.00 ORGAN LLC |
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