

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY 2006 APR 25 AM 8: 41

	(Instructions on back	of application)
1.	The name of the limited liability comp Adirondack LLC	pany is: STATE OF IDAYO
2.	The street address of the initial registed 491 10th Street 10th Street Cen	ter-New Villagers 1319 Fairway Dr Sun Valley ID 8335
	and the name of the initial registered and the name Hubbard	agent at the above address is:
3.	The mailing address for future corresp P O Box 2962 Sun Valley ID 83	
4.	Management of the limited liability cor	mpany 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.	
	member (e), not the name (s) and addit	sos(so) of actions one initial themsel.
	Name	Address
	. ,	· /
	Name	Address
	Name  Judith Laine Hubbard	PO Box 2962 Son Valley IP 83353
6.	Name  Judith Laine Hubbard  Bill Hubbard	PO Box 2962 Son Valley IP 83353

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