

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION APR 26 AM 8: 46 ARTICLES OF ONCO..... LIMITED LIABILITY COMPANY SECRETARY OF STATE STATE OF IDAHO

| | • | tructions on back of application) | | • |
|--|---|--|-----------------------------------|--|
| | The name of the lim | nited liability company is: | 1 | |
| | | Direct Loop, LLC | | |
| | if (longer | the LLC has been administratively dissolved and the available for use, #3 below must include an amount | he name is no endment of name. | - |
| | The date the article | s of organization were filed was: | February 9, 2007 | , . |
| | | | | i Konj≴o nis |
| | COMPLETE ONL | THE APPLICABLE ITEMS | | |
| | | | | |
| | The name of the lin | nited liability company is amended to rea | ad: | |
| | | Direct Loop, LLC | | |
| | | | · | |
| . | The management of | of the limited liability company shall hence | eforth be vested in: | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| •• | | ✓ Manager(s) | 3 | |
| 5. | The information on | the managers/members shall be amend | ied as follows: | |
| | Name Name | <u>Address</u> | Add Delete | Other |
| | Steve Geisler | 51 South Lavaside Rd., Blackfoot, ID 83221 | | |
| | | | | |
| | | PO BOX 513 Shalle ID 83274 | | |
| | BYRON DUFFIN | PO BOX 513 She11'y ID 83274 | | |
| | | PO BOX 513 She11 Ty ID 83274 | | |
| | | PO BOX 513 She11 ID 83274 | | |
| | | PO BOX 513 She11 ID 83274 | | |
| 3. | BYRON DUFFIN | PO BOX 513 She11's ID 83274 | | |
| Signa | BYRON DUFFIN Signature of at lease | st one manager, if any, or at least one m | | only |
| Signa Typed | Signature of at least ture: d Name: Byran Duffin | st one manager, if any, or at least one m | m | only |
| _ | Signature of at least ture: d Name: Byran Duffin | st one manager, if any, or at least one m | ember. | · · · · · · · · · · · · · · · · · · · |
| Signa Typed Capa | Signature of at least ature: d Name: Byran Duffin Member | et one manager, if any, or at least one more than the state of the sta | ember. | only TARY OF STATE 1 1 2 55 = 202 7263 BH: 121942 |
| Signa Typeo Capa Signa Typeo | Signature of at least ature: d Name: Dyran Duffin Member | et one manager, if any, or at least one me | ember. | · · · · · · · · · · · · · · · · · · · |