

ARTICLES OF ORGANIZATION 2005 AUG -4 AM 9: 40 LIMITED LIABILITY COMPANY

(Instructions on back of application)

SECRETARY OF STATE

1.	The name of the limited liability com	npany is:		STATE OF IDAHO
2.	The street address of the initial regis	stered office	e is:	
	60 East Wallace, Driggs, ID 8342	2		
	and the name of the initial registered Sean R. Moulton	d agent at th	e abov	ve address is:
3.	The mailing address for future corres		s:	
4.	Management of the limited liability co	ompany will	be ves	sted in:
	Manager(s) or Member(s)			ppropriate box)
	If management is to be vested in one address(es) of at least one initial mar member(s) list the name(s) and address	nager Ifma	2222	nonéis de le constitute de
	member(s), list the name(s) and addi	ress(es) of a	at least	t one initial member.
	member(s), list the name(s) and addr	ress(es) of a	at least	t one initial member. Address
	member (e), iist the hame(s) and addi	ress(es) of a	at least	one initial member.
	Name William Smith	433 West	Apple	Address stree Court, Mequon, WI 53092
6. \$	Name William Smith Signature of at least one person respect	433 West	Apple	Address stree Court, Mequon, WI 53092
6. \$ Si	Name William Smith	433 West	Apple prming	Address stree Court, Mequon, WI 53092
6. § Si Ty Ci	Name William Smith Signature of at least one person response	433 West	Apple prming	Address stree Court, Mequon, WI 53092 the limited liability company:
6. \$ \$i T; C:	Name William Smith Signature of at least one person response gnature: yped Name: William Smith	433 West	Apple	Address stree Court, Mequon, WI 53092 the limited liability company:

O8/04/2005 05:00 CK: NO CKW CT: 191963 BH: 824912 1 @ 190.00 = 160.00 ORGAN LLC # 2

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