## FILED EFFECTIVE



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2007 OCT 31 PM 4: 27

		(Instructions on bac	ck of application)	SECRETARY OF STATE STATE OF IDAHO	
1.		ne of the limited liability con and Springs, LLC	npany is:		
2.	The street address of the initial registered office is: 575 River Parkway, Idaho Falls, ID 83402				
		name of the initial registered Warren	d agent at the above add	ress is:	
3.	The mailing address for future correspondence is:  2525 Telephone Rd., Santa Maria, CA 93454				
4.		Management of the limited liability company 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.				
	address(e	es) of at least one Initial mai	nager. If management is:	to be vested in the	
	address(e member(s	es) of at least one Initial mai	nager. If management is ress(es) of at least one in	to be vested in the	
	address(e member(s	es) of at least one initial mai s), list the name(s) and add Name	nager. If management is ress(es) of at least one in	to be vested in the litial member.	
	address(e member(s	es) of at least one initial mai s), list the name(s) and add Name	nager. If management is ress(es) of at least one in	to be vested in the litial member.	
6.	Daniel E	of at least one initial mais), list the name(s) and add  Name  . Warren	nager. If management is ress(es) of at least one in 2525 Telephone Road	to be vested in the sitial member.  Address  I, Santa Maria, CA 93454	
6. ; S	Daniel E  Signature:	of at least one initial mais, list the name(s) and add  Name  . Warren  of at least one person response:  e: Scott P. Eskelson	nager. If management is ress(es) of at least one in 2525 Telephone Road possible for forming the lime.	to be vested in the sitial member.  Address  I, Santa Maria, CA 93454	
6. : S T	Daniel E  Signature Signature: Signature: Signature: Signature: Signature	of at least one initial mais, list the name(s) and add  Name  . Warren  of at least one person response:  e: Scott P. Eskelson	nager. If management is ress(es) of at least one in 2525 Telephone Road possible for forming the lime.	to be vested in the sitial member.  Address  I, Santa Maria, CA 93454  Inited liability company:	

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