

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

06 DEC 18 PM 1:39

(E & O	(Instructions on back	kofapplication)	SECRETARY OF STATE	
1. T	The name of the limited liability com	pany is:		STATE OF IDAHO	
	535 Huckleberry, LLC				
2. T	The street address of the initial registered office is:				
	9387 N. Snaffle Bit Ln., Kuna, ID 83634				
·	and the name of the initial registered	d agent at the a	bove addre	ss is:	
·	Tami McHugh	_	•		
3. T	The mailing address for future corres	spondence is:			
	9387 N. Snaffle Bit Ln., Kuna, ID 83634				
4. N	Management of the limited liability company will be vested in:				
	Manager(s) ☐ or Member(s) ✓ (please check the appropriate box)				
a	f management is to be vested in one address(es) of at least one initial ma member(s), list the name(s) and add	inager. If mana	gement is t	o be vested in the tial member.	
	Name			Address	
	Tami McHugh	9387 N. Sn	9387 N. Snaffle Bit Ln., Kuna, ID 83634		
	Timothy McHugh	9387 N. Snaffle Bit Ln., Kuna, ID 83634			
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6. \$	Signature of at least one person resp	ponsible for for	mina the lin	nited liability company:	
	ignature: Kan McHug			Secretary of State use only	
Т	yped Name: Tami McHugh		ation, p8		
С	apacity: Member		oforganiz		
s	ignature		Vormskill.C formskarteoforganization.p55 Ravised 07/2002	IDAHO SECRETARY OF	
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