

## ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY "restructions on back of application)

1.	The name of the limited liability company	y is: Morse FAM. 14 LC#1
2.		and the name of the initial registered
3.	The mailing address for future corresponde	ence: 2101 Lokewood DR. # 225,
4.	Management of the limited liability company will be vested in:	
	Manager(s) ☑ or Member(s) ☐ . (please of	check the appropriate box)
	If management is to be vested in one or mo at least one initial manager. If managemen address(es) of at least one initial member. Name	nore manager(s), list the name(s) and address(es) of nt is to be vested in the members, list the name(s) and r. <u>Address</u>
	Ed Morse	2101 Lakeond DR # 225, Co and Alene Fd. 83814
	Terri Morge	11 11 11 11 11
6. Signature of at least one person responsible for forming the		le for forming the limited liability company:
		Secretary of State use only
		$M'' ) \times (                                $
		IDAHO SECRETARY OF STATE    10