

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

05 APR 21 PM 4: 33

	(**************************************	n or approation/
1.	The name of the limited liability com	SECRETATE OF STATE STATE OF IDAHO
2.	The street address of the initial regis	
	and the name of the initial registered	d agent at the above address is:
3.	The mailing address for future correspondence is: 8645 West Franklin Road, Boise, Idaho, 83709	
4.	Management of the limited liability co	ompany will be vested in: (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.	
	Name	Address
	Gary R. Hawkins	8645 West Franklin Road, Boise, Idaho, 83709
5 T	Signature of at least one person responsional series of the series of the Signature: Signature	Secretary of State use only
5	Signature	IDAHO SECRETARY OF STATE 04/21/2005 05:0 CK: 15818 CT: 68927 BH: 8869 1 2 100.90 = 180.90 OPCOM LICE

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