ALAL SERVICE
TE TO

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED/EFFECTIVE

ED LIABILITY COMPANY

(Illstructions of	
1. The name of the limited liability	company is:
International Employee Solut	ions, LLC
2. The street address of the initial	registered office is:
409 North Main Street, Hailey	y, ID 83333
and the name of the initial regis	stered agent at the above address is:
Cynthia Woolley	
3. The mailing address for future o	correspondence is:
P.O. Box 4590, Hailey, ID 83	·
_	
Manager(s)	(please check the appropriate box)
address(es) or at least one initia	n one or more manager(s), list the name(s) and all manager. If management is to be vested in the
member(s), list the name(s) and	d address(es) of at least one initial member.
member(s), list the name(s) and	d address(es) of at least one initial member. Address
Name	Address
Name Kimberly A. Hayes	Address P.O. Box 4590, Hailey, ID 83333
Name Kimberly A. Hayes	Address P.O. Box 4590, Hailey, ID 83333
Name Kimberly A. Hayes	Address P.O. Box 4590, Hailey, ID 83333
Name Kimberly A. Hayes	Address P.O. Box 4590, Hailey, ID 83333
Name Kimberly A. Hayes Kelly M. Mitchell	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333
Name Kimberly A. Hayes Kelly M. Mitchell 6. Signature of at least one persor	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333 Presponsible for forming the limited liability company:
Name Kimberly A. Hayes Kelly M. Mitchell 6. Signature of at least one person Signature:	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333 Presponsible for forming the limited liability company:
Name Kimberly A. Hayes Kelly M. Mitchell 6. Signature of at least one persor	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333 Presponsible for forming the limited liability company:
Kimberly A. Hayes Kelly M. Mitchell 6. Signature of at least one persor Signature: Kimberly A. Haye	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333 Presponsible for forming the limited liability company:
Kimberly A. Hayes Kelly M. Mitchell 6. Signature of at least one person Signature: Typed Name: Kimberly A. Haye Capacity: Member Signature	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333 Presponsible for forming the limited liability company:
Kimberly A. Hayes Kelly M. Mitchell 6. Signature of at least one persor Signature:	P.O. Box 4590, Hailey, ID 83333 P.O. Box 4590, Hailey, ID 83333 Proposition of the limited liability company: Secretary of State use only Secretary of State use only 1 1/08/2002 05

W 21327