

## FILED EFFECTIVE **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY MAR -3 PH 12: 19

(Instructions on back of application)

SEUNETARY OF CTATE

The name of the limited liabili	STATE OF IDAHO
Jerry R. Nelson, LLC	ty company is.
2. The street address of the initia	al registered office is:
486 Shepherd Road, St. Ma	
_	istered agent at the above address is:
Jerry R. Nelson	
<ol><li>The mailing address for future</li></ol>	e correspondence is:
486 Shepherd Road, St. Ma	aries, Idaho 83861
4. Management of the limited lia	bility company will be vested in:
Manager(s) or Member	(S) (please check the appropriate box)
<b>5</b>	
<u> </u>	d in one or more manager(s), list the name(s) and itial manager. If management is to be vested in the
` ,	nd address(es) of at least one initial member.
Name	Address
Jerry R. Nelson	486 Shepherd Road, St. Maries, Idaho 83861
Cathy L. Nelson	486 Shepherd Road, St. Maries, Idaho 83861
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6. Signature of at least one pers	n responsible for forming the limited liability company:
Signature: for hel	Secretary of State use only
Typed Name: Jerry R. Nelson	jd realion bg
Capacity: Member	otorgani.
	Scarts.
Signatura	E S
Signature Typed Name:	Secretary of State use only