

1.	The name of the limited liability company is:	
2.	(not a PO Box)	
	agent at that address is: Bryan Dilworth	ilea
	Signature of registered agent:	
3.	The latest date certain on which the limited liability company will dissolve: 07/24/20	
4.	Is management of the limited liability company vested in a manager or managers? Yes No (check appropriate box)	
5.	If management is vested in one or more manager(s), list the name(s) and address(es) of least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member. Name: Address:	Ť
	Bryan Dilworth P.O. Box 3600, Ketchum, ID 8334	0_
	Susan Scovell P.O. Box 5863, Ketchum, ID 8334	0
6.	Signature of at least one person listed in #5 above:	<u></u>
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	IDANIO: GECRETARO OF OTATE	
	08/18/2000 09:00 CK: 24% CT: 12794 BH: 342095	
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