TLED EFFECTIVE



ARTICLES OF ORGANIZATION ITED I IARII ITY COMPANY.

nn 21 PH 3: N3

| LIMITED LIABI | LITY COMPAN | July JAT 51 | • |
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| | back of application) | SEC | STATE |
| The name of the limited liability | company is: | 811 11 14 | |
| HealthLight Magazine, L.L.C. | | <u> </u> | |
| The street address of the initial | registered office is: | | |
| 1146 North Garfield Ave., Pod | catello, ID 83402 | | |
| and the name of the initial regis | tered agent at the above | e address is: | |
| Katherine K. Thomas | | | |
| 3. The mailing address for future of | correspondence is: | | |
| 1146 North Garfield Ave., Po | catello, ID 83204 | | |
| 4. Management of the limited liab | ility company will be ves | sted in: | |
| Manager(s) or Member(| S) (please check the s | appropriate box) | |
| 5 If management is to be vested | in one or more manage ial manager. If manage nd address(es) of at leas | ment is to be vest one initial me | ested in the amber. |
| | nd address(es) of at leas | st one initial m Ad dre | ember. |
| If management is to be vested address(es) of at least one init member(s), list the name(s) ar | nd address(es) of at leas | st one initial m Ad dre | ember. |
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| 5. If management is to be vested address(es) of at least one init member(s), list the name(s) ar Name Katherine K. Thomas | 1146 North G | arfield Ave., P | ember. catello, ID 83402 |
| 5. If management is to be vested address(es) of at least one init member(s), list the name(s) an Name Katherine K. Thomas 6. Signature of at least one personal structure. | 1146 North Gason responsible for form | Addre | ember. catello, ID 83402 |
| 5. If management is to be vested address(es) of at least one init member(s), list the name(s) ar Name Katherine K. Thomas 6. Signature of at least one personal stress of the stress | 1146 North Gason responsible for form | Address one initial management of the limited | ember. catello, ID 83402 liability company: |
| 5. If management is to be vested address(es) of at least one init member(s), list the name(s) ar Name Katherine K. Thomas 6. Signature of at least one personal signature: Typed Name: Katherine K. Towner/manager Signature Signature | 1146 North Gason responsible for form | Address one initial management of the limited | ember. catello, ID 83402 liability company: |
| 5. If management is to be vested address(es) of at least one init member(s), list the name(s) ar Name Katherine K. Thomas 6. Signature of at least one person Signature: Typed Name: Katherine K. T Capacity: owner/manager | 1146 North Gasson responsible for form | Address one initial management of the limited seconds of the limited | liability company: |

: 721388355551D CT: 172899 BH: 756789 1 8 188.88 = 188.88 ORGAN LLC # 2 1 8 28.88 = 28.88 EXPEDITE C # 3

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