

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

| 1. | The name of the limited liability compar | ny is: | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
|----|---|--|---------------------------------------|
| | ર્વાઇ Exchange 2710, LLC., an Idaho L | mited Liability Com | pany 1800 1800 |
| 2. | The street address of the initial registered office is: 195 South Broadway, P.O. Box 580, Blackfoot, Idaho 83221 | | |
| | | | |
| | and the name of the initial registered ag | ent at the above addre | ss is: |
| | Shauna Romrell | | |
| 3. | The mailing address for future correspondence is: | | |
| | P.O. Box 580, Blackfoot, Idaho 83221 | | |
| 4. | 4. Management of the limited liability company will be vested in: | | |
| | Manager(s) or Member(s) X | (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) or 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. | | |
| | <u>Name</u> | | Address |
| | EXCHANGE SERVICES, INC. | P.O. Box 580, Bla | ckfoot, Idaho 83221 |
| 6. | Signature of at least one person respon | nsible for forming the lir | nited liability company: |
| | Signature: | 88 | Secretary of State use only |
| | Typed Name:SHAUNA_ROMRELL | | |
| | | | |
| | Signature Marinet | ### IDAHO SECRETARY OF STATE ################################## | |
| | Typed Name: SARA GRIMMETT | | |
| | Capacity: VICE PRESIDENT | Ø & | and an dividi LLU |