

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

OB APR 29 AM 8: 13 SECRETARY OF STATE STATE OF IDAMS

1.	The name of the limited liability co Patricia Snarr LLC	mpany is:	STATE OF IDAHO		
2.	The street address of the initial registered office is: 35 North First East, Driggs, Idaho 83422				
	and the name of the initial registered agent at the above address is: Patricia Snarr				
3.	The mailing address for future correspondence is: P. O. Box 703, Driggs, Idaho 83422				
4.	The limited liability company will be:				
	Manager-managed ✓ or Membe	r-managed		ease check the appropriate box)	
5.	If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member.				
	Name			Address	
	Patricia Snarr	P. O. Box 703, Driggs, Idaho 83422			
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1 to 1 to 1 to 1					
	Signature of at least one person res	ponsible for	forming th	e limited liability company:	
T	yped Name: Patricia Snarr sapacity: Manager		tration.pmd	Secretary of State use only	
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S	ignature		IDAHO SECRETARY OF STATE 04/29/2008 05:00		
	ignatureyped Name:		Medic	CK: 2279 CT: 225448 BH: 1112455 1 0 108.00 = 100.00 ORGAN LLC # 2	
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