

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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STATE OF OF STATE	
STATE OF IDAHO	

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 The name of the limited liability col 	mpany is:
CINDY SIMS, LLC	
2. The street address of the initial reg	istered office is:
10 NORTH MAIN STREET HO	
and the name of the initial registere	
CYNTHIA L. SIMS	- 190/k at the above address is:
3. The mailing address for future corre	spondence is:
P.O. BOX 905 HOMEDALE, ID	
4. Management of the limited liability c	ompany will be vested in:
Manager(s) or Member(s)	
	e or more manager(s), list the name(s) and nager. If management is to be vested in the lress(es) of at least one initial member.
	, and white the triber is
Name	Address
	Address
Name	
Name	Address
Name CYNTHIA L. SIMS	P.O. BOX 394 HOMEDALE, ID 83628
CYNTHIA L. SIMS Signature of at least one person responses	Address
CYNTHIA L. SIMS Signature of at least one person responses to the sum of the	P.O. BOX 394 HOMEDALE, ID 83628 ponsible for forming the limited liability company:
CYNTHIA L. SIMS Signature of at least one person responses	P.O. BOX 394 HOMEDALE, ID 83628 ponsible for forming the limited liability company:
CYNTHIA L. SIMS Signature of at least one person responsion for the second sec	P.O. BOX 394 HOMEDALE, ID 83628 ponsible for forming the limited liability company:
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CYNTHIA L. SIMS Signature of at least one person responsion for the second sec	P.O. BOX 394 HOMEDALE, ID 83628 Donsible for forming the limited liability company: Secretary of State use only W.S. 2364