

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

1	(Instructions on back	
1.	The name of the limited liability comp	STATE OF IDAHO
	I DAHO River Properties LLC	
2.	The street address of the initial regist	tered office is:
	277 N. 6th Street, Boise, Idaho 837	
		· · · · · · · · · · · · · · · · · · ·
	and the name of the initial registered	agent at the above address is:
	Christopher J. Beeson	agent at the above address is:
3.	The mailing address for future corresp	pondence is:
	6 Adventure Lane, Salmon, Idaho 8	83467
4.	Management of the limited liability con	mpany will be vested in:
	Manager(s) v or Member(s) (please check the appropriate box)	
	address(es) or at least one initial man	or more manager(s), list the name(s) and nager. If management is to be vested in the
	address(es) or at least one initial man	
	address(es) or at least one initial man member(s), list the name(s) and addr Name	nager. If management is to be vested in the ress(es) of at least one initial member. Address
	address(es) or at least one initial man member(s), list the name(s) and addr Name	nager. If management is to be vested in the ress(es) of at least one initial member. Address c/o Idaho Adventures 6 Adventure Lane
	address(es) or at least one initial man member(s), list the name(s) and addr Name	nager. If management is to be vested in the ress(es) of at least one initial member. Address c/o Idaho Adventures
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	address(es) or at least one initial man member(s), list the name(s) and addr Name	nager. If management is to be vested in the ress(es) of at least one initial member. Address c/o Idaho Adventures 6 Adventure Lane
	address(es) or at least one initial man member(s), list the name(s) and address. Name Mark Troy	nager. If management is to be vested in the ress(es) of at least one initial member. Address c/o Idaho Adventures 6 Adventure Lane
6. S	address(es) or at least one initial man member(s), list the name(s) and address. Name Mark Troy Signature of at least one person responses.	nager. If management is to be vested in the ress(es) of at least one initial member. Address c/o Idaho Adventures 6 Adventure Lane Salmon, Idaho 83467 onsible for forming the limited liability company:
6. S	address(es) or at least one initial man member(s), list the name(s) and address. Name Mark Troy Signature of at least one person responsion to the second	nager. If management is to be vested in the ress(es) of at least one initial member. Address c/o Idaho Adventures 6 Adventure Lane Salmon, Idaho 83467 onsible for forming the limited liability company:
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