

## ARTICLES OF ORGANIZATION FILED EFFECTIVE

(Instructions on back of application) APR 25 M 9: 39

1.	The name of the limited liability comp	any is:	STATE UF	<sup>เม</sup> าทิป	
2.	The street address of the initial registered office is:  1110 N. FIVE MILE RD., BOISE, IDAHO 83713				
	and the name of the initial registered agent at the above address is:  JOSEPH O. SWENSON				
3.	The mailing address for future correspondence is:  1110 N. FIVE MILE RD., BOISE, IDAHO 83713				
4.	Management of the limited liability company will be vested in:				
	Manager(s) ✓ or Member(s)	fanager(s) ✓ or Member(s) (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) of 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.				
	Name			Address	
	JOSEPH O. SWENSON	1110 N. FIVE MILE RD., BOISE, IDAHO 83713			
	S. ANDREW SWENSON	1110 N. FI	IVE MILE RD., BOISE, IDAHO 83713		
6.	Signature of at least one person responsible for forming the limited liability company:				
	Signature: <u>JOSEPH O. SWENSOI</u> Typed Name: <u>JOSEPH O. SWENSOI</u> Capacity: MANAGER		anization,p65	Secretary of State use only	
	Signature	N .	corpVomsvLC framstartsofraganization, p65 Ravised 07/2002	IDAHO SECRETARY OF STATE  04/25/2005 05:00  CK: 8270 CT: 26194 BH: 806613 1 @ 100.00 = 100.00 ORGAN LLC # 2	