

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2005 APR -6 PM 2: 08

1. The name of the limited liability c	ompany is:	STATE
FAMILY EXPLORER, LLC		
2. The street address of the initial re	egistered office is:	
1401 Shoreline Drive, Suite	2, Boise, Idaho 83702	
and the name of the initial registe	ered agent at the above address is:	
Corporation Service Company		
3. The mailing address for future cor		
1402 Oaklawn_Drive, Boise,		
Management of the limited liability		
Manager(s) or Member(s)	(please check the appropriate box)	
address(es) or at least one initial	one or more manager(s), list the name(s) and manager. If management is to be vested in th address(es) of at least one initial member.	e
Name	Address	
RUSSELL B LEE	1402 OAKLAWN DRIVE, BOISE, ID 8370	9
	TO SECUL SEC	
. Signature of at least one person re	esponsible for forming the limited liability com	pany:
Signature: Allaman	Secretary of State use	only
Typed Name: Liz A Minmaugh		•
Capacity: Organizer	olorganiz	
Signature	Secretary of State use IDAHO SECRE 2002// CK: 2033873 CT: 1 @ 100.00 = 10 1 @ 20.00 = 20	TARY OF STATE
Signature Typed Name:	IDAHO SECRE	164964 BH: 8030
Canacity:		0.00 ORGAN LLC:

W 35/S/