

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECT VE

(Instructions on back of application)

2007 JAN 25 AH 8: 35

1. 7	The name of the limited liability comp	pany is:	SECRETARY OF STATE STATE OF IDAHO	
2. 1	The street address of the initial registered office is:  519 N 400 E RUPERT, ID 83350			
a	and the name of the initial registered agent at the above address is:  DONALD J. KONRAD			
	The mailing address for future correspondence is: 519 N 400 E RUPERT, ID 83350			
4. N	Management of the limited liability company will be vested in:			
N	Manager(s) ☐ or Member(s) ✓ (please check the appropriate box)			
а	f 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 nember(s), list the name(s) and address(es) of at least one initial member.			
	Name	Address		
	DONALD J. KONRAD	519 N 400 E RUPERT, ID 83350		
	DACLYNN S. JOHNSON	1218 9TH STE #10 RUPERT, ID 83350		
•				
6. Signature of at least one person responsible for forming the limited liability company:				
_	ped Name: DONALDJ. KONRAD	Secretary of State use only		
	pacity:			
		Marken		
	gnature	plomstLC formstartss Revised 07/2002	IDAHO SECRETARY OF STATE	
	ped Name:	Servised Revised	01/25/2007 05:00 CK: 18097 CT: 93701 BH: 1028624	
Ca	pacity:		1 0 180.00 = 180.00 ORGAN LLC #	