

ARTICLES OF ORGANIZATION LED/EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

		STATE OF IDAM
1.	The name of the limited liability company	M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1
2.	The address of the initial registered office i	s: _2018 Powers Avenue, Lewiston, ID
	agent at that address is:Stuart V. Da	vis and the name of the initial registered
3.	The mailing address for future corresponder 83501	nce: 2018 Powers Avenue, Lewiston, ID
ŀ.	Management of the limited liability company	will be vested in:
	Manager(s) or Member(s) . (please che	ook the envisit has
	manager(e)	eck the appropriate box)
5.	If management is to be vested in one or more at least one initial manager. If management address(es) of at least one initial member. Name	re manager(s), list the name(s) and address(es) of is to be vested in the members, list the name(s) and Address
	Stuart V. Davis	2018 Powers Avenue, Lewiston ID 83501
	Peter J. Davis	33 Lagoon Vista, Tiburon, CA 94920
3 .	Signature of atleast one person responsible for forming the limited liability company:	
	Stuart V. Davis	Secretary of State use only
		1DAHO SECRETARY OF STATE
		86/14/2000 93:00
		CK: 3004 CT: 9686 BH: 326195
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