

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

(Instructions on back of application 99 MAY 14 PM 2: 16

STATE OF IDAHO 2. The address of the initial registered office is: __2438 W. Soltice Way, Post Falls __ Idaho, 83854 _____ and the name of the initial registered agent at that address is: Steve Gobin Signature of registered agent : = 3. Management of the limited liability company will be vested in: Manager(s) or Member(stax . (please check the appropriate box) 4. 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 members, list the name(s) and address(es) of at least one initial member. <u>Address</u> Name 2438 W. Seltice Way, Post Falls ID Steve Gobin 5. Signature of at least one person responsible for forming the limited liability company: Steve Gobin IDOMO SECRETARY OF STATE ONLY **05/14/1999 09:00** CK: 5143 CT: 66834 BH: 216998 1 @ 100.00 = 100.00 ORGAN LLC # 2 W 8771