

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVL

(Instructions on back of application)

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| STATE OF IDAHO |
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| e box) |
| the name(s) and to be vested in the nitial member. |
| Address |
| e, ID 83717 |
| e, ID 83717 |
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| mited liability company: |
| Secretary of State use only |
| IDANO SECRETARY DE STATE |

| 1. | The name of the limited liability comp | pany is: | CAUCA LARY OF STATE STATE OF BOAHO | |
|----|---|-------------------------------|--|--|
| 2. | The street address of the initial registered office is: 8749 W. Hackamore Dr., Boise, Id. 83709 | | | |
| | and the name of the initial registered Sandii Zavala | agent at the above | address is: | |
| 3. | The mailing address for future correspondence is: PO Box 170154 Boise, ID 83717 | | | |
| 4. | Management of the limited liability company will be vested in: | | | |
| | Manager(s) or Member(s) (please check the appropriate box) | | | |
| 5. | If management is to be vested in one address(es) of at least one initial man member(s), list the name(s) and addr | lager. If manageme | ent is to be vested in the | |
| | Name | | Address | |
| | Sandii Zavala | PO Box 170154 | Boise, ID 83717 | |
| | Daniel Boynton | PO Box 170154 Boise, ID 83717 | | |
| | | | | |
| | Signature of at least one person responsion | 4 | the limited liability company: | |
| - | Typed Name: Sandii Zavala | 99) no | Secretary of State use only | |
| | Capacity: Office Supervisor | organizatic | | |
| - | Signature Typed Name: Capacity: | | IDAHO SECRETARY OF STATE @2/13/2004 05:00 CK: 3514 CT: 159854 BH: 72732 1 8 100.00 = 100.00 ORGAN LLC (| |

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