

FILED EFFECTIVE ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPAIN MAR OF

	(Instructions on bac	k of application)
1.	The name of the limited liability com	npany is:
2.	The street address of the initial regis	stered office is:
	P.O. BOX 851, SODA SPRINGS, ID 83276 166 W 2nd S Soda Springs ID 83276	
	and the name of the initial registered	
3.	The mailing address for future corres	spondence is:
	P.O. BOX 851, SODA SPRINGS,	ID 83276
4.	Management of the limited liability co	ompany will be vested in:
	Manager(s) or Member(s)	(please check the appropriate box)
5.	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 member(s), list the name(s) and address(es) of at least one initial member.	
	Name	Address
	TODD HUNZEKER	P.O. BOX 851, SODA SPRINGS, ID 83276
		ponsible for forming the limited liability company:
5	Signature:	Samta of State
-		Samta of State
· ·	Signature: TODD HUNZEKER	Secretary of State use only IDAHO SECRETARY OF STATE 2007 CK: 29507 CT: 63065 PH: 806529