

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

· ·	(Instructions on ba	ck of application)	CONTRACTOR OF THE PARTY OF THE
1.	The name of the limited liability con	mpany is:	OF OF SAIR SI
	Idaho Development, L.L.C.		
2.	The street address of the initial reg	istered office is:	
	3250 Highway 12, MP 64, Kamia		
	and the name of the initial registere	ed agent at the abov	e address is:
	Marjorie Schmaehl		
3.	The mailing address for future corre	espondence is:	
	P.O. Box 1492, Kamiah, ID 8353	36	
4.	Management of the limited liability	company will be ves	ted in:
		✓ (please check the a	
		<u> </u>	
	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.		
5.	address(es) of at least one initial m	anager. If managen	nent is to be vested in the tone initial member.
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	address(es) of at least one initial m member(s), list the name(s) and ad Name	P.O. Box 1492,	Address Kamiah, ID 83536
6.	address(es) of at least one initial member(s), list the name(s) and ad Name Marjorie Schmaehl Signature of at least one person res	P.O. Box 1492,	Address Kamiah, ID 83536
6. \$	Address(es) of at least one initial member(s), list the name(s) and ad Name Marjorie Schmaehl Signature of at least one person res Signature: Marjorie Schmaehl Typed Name: Marjorie Schmaehl	P.O. Box 1492,	Address Kamiah, ID 83536 g the limited liability company:
6. \$	address(es) of at least one initial member(s), list the name(s) and ad Name Marjorie Schmaehl Signature of at least one person res	P.O. Box 1492,	Address Kamiah, ID 83536 g the limited liability company:
6. \$	Address(es) of at least one initial member(s), list the name(s) and ad Name Marjorie Schmaehl Signature of at least one person resignature: Marjorie Schmaehl Typed Name: Marjorie Schmaehl Capacity: Member	P.O. Box 1492,	Address Kamiah, ID 83536 g the limited liability company: Secretary of State use only
6. S	Address(es) of at least one initial member(s), list the name(s) and ad Name Marjorie Schmaehl Signature of at least one person rest Signature: Marjorie Schmaehl Capacity: Member Signature	P.O. Box 1492,	Address Kamiah, ID 83536 g the limited liability company:
6. 3. 3.	Address(es) of at least one initial member(s), list the name(s) and ad Name Marjorie Schmaehl Signature of at least one person resignature: Marjorie Schmaehl Typed Name: Marjorie Schmaehl Capacity: Member	P.O. Box 1492,	Address Kamiah, ID 83536 g the limited liability company: Secretary of State use only

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