

Capacity:

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

06 OCT	11 p	
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company:		
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HO SECRETARY OF	STATE	

1.	The name of the limited liability compa	any is: STATE OF IDA	
2. •	The street address of the initial registe		
۵.	1015 W. Hudson Ave Nampa, ID 83651		
	and the name of the initial registered a	agent at the above address is:	
	Harmon Tobler		
3.	The mailing address for future correspondence is:		
	1015 W. Hudson Ave Nampa, ID	83651	
4.	Management of the limited liability cor	mpany will be vested in:	
1	Manager(s) or Member(s)	(please check the appropriate box)	
į	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	
Harmon Tobler 10		1015 W. Hudson Ave Nampa, ID 83651	
	Lynda Tobler	1015 W. Hudson Ave Nampa, ID 83651	
		:	
3.	Signature of at least one person respo	onsible for forming the limited liability company:	
	Signature:	Secretary of State use only	
7	Typed Name: Harmon Tobler		
C	Capacity: Member		
5	Signature	IDAHO SECRETARY OF STATE 10/11/2006 05:00 CK: CASH CT: 205340 BH: 979623	
	Typed Name:	CK: CASH CT: 205340 BH: 979623	