

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

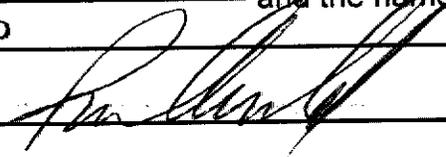


APPROVED
STATE OF IDAHO

1. The name of the limited liability company is: CLOUD NINE PERSONNEL, L.L.C.

2. The address of the initial registered office is: 147 N. 2 ND E. REXBURG, ID 83440
(not a PO Box)

MAIL ADDRESS: PO BOX 406 REXBURG, ID 83440 and the name of the initial registered agent at that address is: RON ARNOLD

Signature of registered agent: 

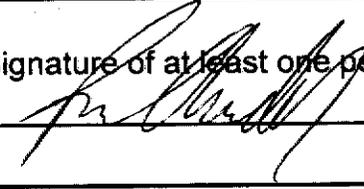
3. The latest date certain on which the limited liability company will dissolve: _____

4. Is management of the limited liability company vested in a manager or managers?
 Yes No (check appropriate box)

5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

<u>Name:</u>	<u>Address:</u>
<u>RON ARNOLD</u>	<u>21 N. PINE AVE. SUGAR CITY, ID</u>
	<u>[MAIL] P.O. BOX 117</u>
	<u>83448</u>
_____	_____
_____	_____
_____	_____
_____	_____

6. Signature of at least one person listed in #5 above:



IDAHO SECRETARY OF STATE
Secretary of State use only
08/26/1997 09:00
CK: 128 CT: 83228 BH: 33103
1 @ 100.00 = 100.00 ORGAN LLC
W 4584

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