

**ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

FILED/EFFECTIVE

**APR 16 AM 10:12
SECRETARY OF STATE
STATE OF IDAHO**

- 1. The name of the limited liability company is: **Blue Lakes Place, L.L.C.**
- 2. The address of the initial registered office is: **1020 Blue Lakes Blvd. North, Twin Falls, Idaho 83301**

and the name of the initial registered agent at that address is: **James M. Paxton.**

Signature of registered agent: James M. Paxton

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

- 4. 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.

Name:

Address:

James M. Paxton

**1020 Blue Lakes Blvd. North
Twin Falls, ID 83301**

Barbara Jo Paxton

**1020 Blue Lakes Blvd. North
Twin Falls, ID 83301**

- 5. Signature of at least one person listed in #4 above:

James M. Paxton
James M. Paxton

Barbara Jo Paxton
Barbara Jo Paxton

IDAHO SECRETARY OF STATE

**04/17/2001 09:00
CX: 25366 CT: 2053 BN: 391494**

1 @ 100.00 = 100.00 ORGAN LLC # 2

W 15077