

## ARTICLES OF ORGANIZATION FILED/EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

Mar 2 3 16 PM '01

1.	The name of the limited liability company is	s: Right Direction, L.L. C. SAR A SARE
2.	The address of the initial registered office is Glenns Ferry, ID 83623 agent at that address is: Cindy M. Crowel	and the name of the initial registered
3.		
4.	Management of the limited liability company will be vested in:  Manager(s)  or Member(s) . (please check the appropriate box)	
<b>5</b> .	If management is to be vested in one or monat least one initial manager. If management is address(es) of at least one initial member.  Name	re manager(s), list the name(s) and address(es) of is to be vested in the members, list the name(s) and Address
	Cindy M. Crowell	P.O. Box 123 Glenns Ferry, ID 83623
6.	Signature of at least one person responsible for forming the limited liability company:  Cindy M. Crowell  Secretary of State use only	
	Manager	IDAHO SECRETARY OF STATE  ### ### ### ########################

1 9 108.00 = 100.00 ORGAN LLC # 3 1 9 28.06 = 28.08 EXPEDITE C # 4

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