



ARTICLES OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2004 OCT -1 AM 8:51
STATE OF IDAHO

1. The name of the limited liability company is:

PAIRADORCS, L.L.C.

2. The street address of the initial registered office is:

1703 ADDISON AVE E, TWIN FALLS, ID 83301

and the name of the initial registered agent at the above address is:

DELEA MILLER

3. The mailing address for future correspondence is:

1703 ADDISON AVE E, TWIN FALLS, ID 83301

4. Management of the limited liability company will be vested in:

Manager(s) or Member(s) (please check the appropriate box)

5. 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

DELEA C. MILLER

2314 E 3500 N, FILER, ID 83328

6. Signature of at least one person responsible for forming the limited liability company:

Signature: Delea C. Miller

Secretary of State use only

Typed Name: DELEA C. MILLER

Capacity: MANAGER

Signature _____

Typed Name: _____

Capacity: _____

LLC Form 100
Revised 07/2002
Corporations and Organization
Web Form

IDaho SECRETARY OF STATE
10/01/2004 05:00
CK: 3146 CT: 182595 BH: 768962
1 @ 100.00 = 100.00 ORGAN LLC # 2

W33411