## FILED EFFECTIVE



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

Signature \_\_\_\_\_

Typed Name:

Capacity: \_\_\_\_

<b>3</b> (	Instructions on back o	of application)	113 45 ta 2: 23
	limited liability compa	any is:	SEC. STATE STATE OF IDAHO
The street addre	ss of the initial registed		
	the initial registered a		ddress is:
	ress for future corresp dilly St. Boise ID 837		
	the limited liability cor		
Wanager(o)	, , , <u> </u>		
If management i	s to be vested in one	nager. If managemer	nt is to be vested in the
If management i	s to be vested in one of the state of the st	nager. If managemer	nt is to be vested in the
If management i	s to be vested in one out least one initial man the name(s) and addr	nager. If managemer ress(es) of at least or	nt is to be vested in the ne initial member.
If management i address(es) of a member(s), list t	s to be vested in one out least one initial man the name(s) and addr	nager. If managemer ress(es) of at least or	nt is to be vested in the ne initial member.  Address
If management i address(es) of a member(s), list t	s to be vested in one out least one initial man the name(s) and addr	nager. If managemer ress(es) of at least or	nt is to be vested in the ne initial member.  Address
If management is address(es) of a member(s), list to Kimberly D. Sa	s to be vested in one of the least one initial man the name(s) and address Name	13153 W. Picadilly	nt is to be vested in the ne initial member.  Address

10/26/2004 05:00 CK: 1063 CT: 183212 BH: 773208 W34150