

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

Ť	(Instructions on bac	k of application	on)	07 -6 AM 8: 5 6	
	The name of the limited liability con	npany is:	Sec.		
	The street address of the initial registered office is: 245 3rd Avenue North, Twin Falls, ID 83301				
	and the name of the initial registered Timothy J. Stover, Esq.	d agent at the	above ado	dress is:	
	The mailing address for future correspondence is: 20714 Snag Island Drive, Lake Tapps, Washington 98391				
١.	Management of the limited liability of Manager(s) or Member(s)	· ·	De vested in		-
٠.	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.				
	member(s), list the name(s) and add	dress(es) of a	it least one	initial member.	
	member(s), list the name(s) and add Name Dan Miller	,		initial member. Address Or., Lake Tapps, WA 9839	<u>1</u>
	Name	,		Address	<u>1</u>
	Dan Miller Signature of at least one person responses	20714 Sn	ag Island C	Address Dr., Lake Tapps, WA 9839 limited liability company:	<u>-</u>
	Name Dan Miller	20714 Sn	ag Island C	Address Or., Lake Tapps, WA 9839	<u>-</u> -

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