

Capacity: \_

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2007 MAY 23 AM 8: 33

1.	The name of the limited liability comp	any is:	SECRETARY OF STATE STATE OF IDAHO
	Shake Out LLC		OTTL OF IDATIO
2.	The street address of the initial registered office is:		
	1186 Kimberly Road Twin Falls Idaho 83301		
	and the name of the initial registered a	agent at the abo	ove address is:
3.	The mailing address for future corresp 1651 Hunt Road Jerome, Id 83338		
4.	Management of the limited liability company will be vested in:		
	Manager(s) or Member(s)		e 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
	Merilee Waters	1651 Hunt Ro	oad Jerome, Id 83338
6.	Signature of at least one person responsible for forming the limited liability company:		
	Signature: // )erule //	alls 3	Secretary of State use only
	Typed Name: Merilee Waters		Elleru
	Capacity: Member  Signature Merille W	sW.L.C. formsdartsofkoganization p65	IDAHO SECRETARY OF STATE  05/23/2007 05:00  CK: 2539 CT: 184945 BH: 1855471  1 8 180.80 = 100.80 ORGAN LLC # 2
	Typed Name:	madtr	2 1 # 190° sa = 100° ss numu erc a c