ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY



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	STATE	(Instructions	on back of	f application)	THE STATE OF THE S
the nar	me of the limi	ited liability co	mpany is:	JP Arabia	ns, L.L.C.	
The add	dress of the in	itial registered	l office is:	(ROLE PO BOX)		ian, ID 83642
agent at	that address	is: Patricia	E. Anson	a	nd the name of	of the initial register
-	re of registere	_		ixia (wow
The late	est date certai	n on which the	e limited lia	bility compa	any will dissoh	re : 12/31/2075
ls mana	gement of the	e limited liabilit		/ vested ⁱ in i lo (check app		managers?
least on	e initial mana	ger. If manag at one initial me	ement is vo	ested in the	• •	nd address(es) of the name(s) and
Patric	ia E. Anson	÷	6		o Ln., Meridi	an, ID 83642
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Signatur	e of at letist of	one person list	ed in #5 at	pove:		
Signatur	e of at seast of	ine person list	ed in #5 at	oove:		
Signatur	e of at wast of	ine person list	#5 at	oove:	Secretary	of State use only
Signatur	e of at less of	one person list	ed in #5 at	pove:	IDAHO SECRET	ARY OF STATE
Signatur	e of at less of	one person list	ed in #5 at	pove:	IDAHO SECRET Ø6/11/1 CK: 9316 CT: 8	ARY OF STATE 999 09:00 5073 BH: 225073
Signatur	e of at letist of	ne person list	ed in #5 at	DOVE:	IDAHO SECRET 26/11/1 CK: 9316 CT: 2 1 8 189.00 = 1	ARY OF STATE 999 09:00