

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

06 APR 24 PM 2: 59

4 7	on dipplication)	
The name of the limited liability col	mpany is:	SECRED : OF STATE
TriplePlay4Idaho, LLC		STATE OF IDAHO
2. The street address of the initial regi	istered office is:	
8030 Emerald St. STE185, Boise	, Idaho 83704	
and the name of the initial registere		
Heather T. Echevarria	a agont at the above addres	SS IS:
3. The mailing address for future corre		
PO Box 140272, Boise, Idaho 837	spondence is:	
· · · · · · · · · · · · · · · · · · ·		
4. Management of the limited liability co	ompany will be vested in:	
Manager(s) v or Member(s)	please check the appropriate bo	x)
If management is to be vested in one address(es) of at least one initial man member(s), list the name(s) and addition	or more manager(s), list the nager. If management is to t ress(es) of at least one initia	e name(s) and be vested in the ll member.
Name	Ad	ldress
Ben Echevarria	PO Box 140272 Roise IT	02744 0070
Heather Echevarria	PO Box 140272, Boise ID 83714-0272 PO Box 140272, Boise ID 83714-0272 19808 SF 8th St Sammanish IVA 0007	
Rich Seiler		
Shelly Seiler	19808 SE 8th St Sammamish, WA 98074-3804	
Mike Fell	19808 SE 8th St Sammamish, WA 98074-3804	
	PO Box 149, Homer AK	99603
6. Signature of at least one person responsionature	nsible for forming the limited	liability company
THE TAXABLE CONTRACTOR	ma	!!
Typed Name: Neather T. Echevarria	Secre	etary of State use only
Capacity: Manager	ngenizat	
Signature	Corpytomet LC formstarts of organization, p65 Revised 07/2002	IDAHO SECRETARY OF STATE
SignatureTyped Name:	Pomet LC forms	04/24/2006 05:00 CK: 1119 CT: 199513 BH: 950988
Capacity:	1 Semen	0 100.00 = 100.00 ORGAN LLC # 2 20.00 = 20.00 EXPEDITE C # 3
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