

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

64 DEC 21 PH 3: 22

4	(instructions on dac	Korappiication)
1.	The name of the limited liability com Provizio Associates LLC	npany is: SECHE OF STATE STATE OF IDAHO
2.	The street address of the initial regis	
	and the name of the initial registered	d agent at the above address is:
3.	The mailing address for future corre 406 South Stibnite Avenue, Kuna	
4.		company will be vested in: (please check the 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
	Steve Ackerman	406 South Stibnite Avenue
		Kuna, ID 83634
6.	Signature of at least one person res Signature: Typed Name: Steve Ackerman Capacity: Member Signature	Secretary of State use only Secretary of State use only
	Typed Name: Stephan M.	Hellerman
	Capacity President d. C	12/21/2804 05 Web Form CV. 16844 CT. 151848 RM:

IDAHO SECRETARY OF STATE
12/21/2604 05:00
CK: 16884 CT: 151840 BH: 782916
1 9 188.88 = 188.88 ORGAN LLC # 2