FILED EFFECTIVE



## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

04 NOV 10 PM 3: 14

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability comp	pany is: STATE: OF IDAHO
	Johnson Clackamas LLC	
2.	The street address of the initial regist	ered office is:
	8645 West Franklin Road, Boise, lo	daho, 83709
	and the name of the initial registered	agent at the above address is:
	Gary R. Hawkins	
3.	The mailing address for future corres	pondence is:
	8645 West Franklin Road, Boise, le	
4	Management of the limited liability co	mpany will be vested in:
	Manager(s)  or Member(s)	
	Manager(s)	(picase circox are appropriate sox)
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
	Name:	
	Delea Complete 2000 LLC	9645 Most Franklin Boad Boise Idaho 83700
	Boise Surplus 2002 LLC	8645 West Franklin Road, Boise, Idaho, 83709
	Boise Surplus 2002 LLC (Manager: Gary R. Hawkins)	8645 West Franklin Road, Boise, Idaho, 83709
		8645 West Franklin Road, Boise, Idaho, 83709
		8645 West Franklin Road, Boise, Idaho, 83709
		8645 West Franklin Road, Boise, Idaho, 83709
		8645 West Franklin Road, Boise, Idaho, 83709
	(Manager: Gary R. Hawkins)	
6.	(Manager: Gary R. Hawkins)  Signature of at least one person response	onsible for forming the limited liability company:
6.	(Manager: Gary R. Hawkins)  Signature of at least one person responsionature:	onsible for forming the limited liability company:
6.	(Manager: Gary R. Hawkins)  Signature of at least one person responsionature:  Typed Name: Rob G. Dickinson	onsible for forming the limited liability company:
6.	(Manager: Gary R. Hawkins)  Signature of at least one person responsionature:  Typed Name: Rob G. Dickinson	onsible for forming the limited liability company:
6.	(Manager: Gary R. Hawkins)  Signature of at least one person responsion responsion at least one person responsibilities at least one person responsi	onsible for forming the limited liability company:
6.	(Manager: Gary R. Hawkins)  Signature of at least one person responsion responsibility	Secretary of State use only  Secretary of State use only  IDAHO SECRETARY OF STATE  11/10/2064 65:00  CK: 13919 CT: 157189 BH: 775941  1 9 109.00 = 100.00 ORGAN LLC 1

W 34459