

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2004 MAR 15 AM 8:51

(Instructions on back of application)

| STOPPO | (Instructions on back of | or application) | GER EL PRI DE STATE |
|----------------|---|---|-----------------------------|
| l. Ther | ame of the limited liability comp | any is: | STATE OF IDAHO |
| NET | WORK CENTRAL, LLC. | | |
| . The s | treet address of the initial registe | ered office is: | |
| 105 | 10527 OVERLAND ROAD, BOISE, ID 83709 | | |
| and t | ne name of the initial registered a | agent at the above addr | ress is: |
| | TH SIGLER | | |
| The r | nailing address for future corresp | oondence is: | |
| | 0527 OVERLAND ROAD, BOISE, ID 83709 | | |
| | | | |
| | Management of the limited liability company will be vested in: | | |
| Mana | Manager(s) or Member(s) (please check the appropriate box) | | |
| addre | nagement is to be vested in one or more manager(s), list the name(s) and ess(es) of at least one initial manager. If management is to be vested in the ber(s), list the name(s) and address(es) of at least one initial member. | | |
| | Name Address | | |
| JOH | HN PHILLIPS | 8211 E. Brandts Creek Way, Nampa, ID 83687 | |
| KEI | TH SIGLER | 5181 N. Rothmans Ave., Boise, ID 83713 | |
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| . Sign | ature of at least one person resp | onsible for forming the li | mited liability company: |
| Signa | | [sg | Secretary of State use only |
| | Name: KEITH SIGLER | duo | |
| Capa | city: member | olorgani | |
| diana | tura / -/2-//- | rms/arts | IDAHO SECRETARY OF |
| Signa Typed | Name: JOHN PHILLIPS | npylomesULC forms witsoforganization p65 Revised 07/2002 | CK: 1001 CT: 177451 |
| Cana | city: member | rpylorm | 1 6 100100 - 100.00 U |

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