



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

DAVE WILSON, LLC

STATE OF IDAHO

2. The street address of the initial registered office is:

110 WALLACE AVENUE, COEUR D'ALENE, IDAHO 83814

and the name of the initial registered agent at the above address is:

ARTHUR M. BISTLINE

STATE OF IDAHO  
RECEIVED  
JULY 19 PM 3:09  
2004  
SACRAMENTO STATE

3. The mailing address for future correspondence is:

POST OFFICE BOX 634, ATHOL, IDAHO 83801

4. Management of the limited liability company will be vested in:

Manager(s)  or Member(s)  (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

DAVE WILSON

PO BOX 634

ATHOL ID 83801

6. Signature of at least one person responsible for forming the limited liability company:

Signature: David Wilson

Secretary of State use only

Typed Name: DAVE WILSON

Capacity: MEMBER

Signature

Typed Name:

Capacity:

LLC Form 100  
Revised 07/2002

IDAHO SECRETARY OF STATE  
07/19/2004 05:00  
CK: 4462 CT: 70960 RH: 756223  
10 100.00 = 100.00 ORGAN LLC # 2  
10 20.00 = 20.00 EXPEDITE C # 3

W 31952

FILED  
EFFECTIVE