Capacity:

LIMITED LIABILITY COMPANY (Instructions on back of application) 1. The name of the limited liability company is: Harrington Property Management, L.L.C. 2. The street address of the initial registered office is: 502 5th St., Lewiston, Idaho 83501 and the name of the initial registered agent at the above address is: Benjamin M. Harrington 3. The mailing address for future correspondence is: 502 5th St., Lewiston, Idaho 83501 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. Address Name Benjamin M. Harrington 502 5th St., Lewiston, Idaho 83501 6. Signature of at least one person responsible for forming the limited liability company: Signature: (1) Signature: Secretary of State use only Typed Name: Benjamin M. Harrington Capacity: Member Signature _____ Typed Name: