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ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2005 MAR 10 AM 7: 11

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability compa	any is:	STATE OF IDAHO
2.	The street address of the initial register 1241 ASPEN VALLEY DR, HAILE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	and the name of the initial registered a CINDI HILLEMEYER	gent at the above addre	988 is:
3.	The mailing address for future correspondence is: PO BOX 2478 HAILEY, IDAHO		
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
	ANGELA GRANT	PO BOX 3237 HAILE	EY, ID
	CINDI HILLEMEYER	PO BOX 511 KETCI	HUM, ID
6.	6. Signature of at least one person responsible for forming the limited liability compositions. Signature: Secretary of State use of S		mited liability company: Secretary of State use only
	Signature Typed Name: ANGELAGRANT Capacity: MANAGER	C Complement LLC Command West Command Williams of Washington Washi	IDAHO SECRETARY OF STATE 03/19/2005 05:00 CK: 492367 CT: 172099 BH: 797665 1 0 100.00 = 100.00 ORGAN LLC # 2