

Capacity:

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2005 JUN 15 67 5 04

(Instructions on back of application) 1. The name of the limited liability company is: JKL BILLING LLC 2. The street address of the initial registered office is: 208 DIAMOND DR KIMBERLY ID 83341 and the name of the initial registered agent at the above address is: KATHI L EGBERT 3. The mailing address for future correspondence is: PO BOX 413 KIMBERLY ID 83341 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 KATHI L EGBERT PO BOX 413 KIMBERLY ID 83341 6. Signature of at least one person responsible for forming the limited liability company: Signature: KOHKISTE Secretary of State use only Typed Name: KATHI L EGBERT Capacity: MEMBER IDANO SECRETARY OF STATE 06/15/2005 05:00 Signature Typed Name: _____