

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

1. The name of the limited liability company is: Aspon Medical (50 2. The address of the initial registered office is: 1904 Carolegic Design Tww Falls, Tooks 83301 and the name of the initial registered agent at that address is: Tony wens 3. The mailing address for future correspondence: Same As above 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 members, list the name(s) and address(es) of at least one initial member. Name **Address** 115 Falls Are Ugot TrinFalls TO 6301 Byron McCom 1904 Can Deringe De TrinFalls ID 53201 6. Signature of at least one person responsible for forming the limited liability company: W13996