

Capacity:

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

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A A	(Instructions on bac	ck of application)	OS NOVOZ PO
1.	The name of the limited liability con	npany is:	06 NOV 27 PH 3: 13
	Cowboy Partners, LLC		SECRETARY OF STATE
2.	The street address of the initial regi	stered office is:	SIMIE. UF IDAHO
	199 North Capitol Boulevard, Suite 600, Boise, Idaho 83702		
	and the name of the initial registered agent at the above address is:		
	Jeanette Ostman		
-	The mailing address for future corre	spondence is:	
	199 North Capitol Boulevard, Suite 600, Boise, Idaho 83702		
	Management of the limited liability company will be vested in:		
	Manager(s) or Member(s) (please check the appropriate box)		
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.	If management is to be vested in one or more manager(s), list the name(s) and		
i	address(es) of at least one initial ma	inager. If management is	s to be vested in the
	member(s), list the name(s) and add	iress(es) of at least one i	nitial member.
	Name		Address
	RB, LLC, First Manager	199 N. Capitol Blvd.,	Ste. 600, Boise, ID 83702
	Mel Brown, Second Manager	199 N. Capitol Blvd.,	Ste. 600, Boise, ID 83702
	Third Manager, To Be Determinឡ	199 N. Capitol Blvd., Ste. 600, Boise, ID 83702	
S	Signature of at least one person resp	onsible for forming the li	mited liability company:
	gnature:		Secretary of State use only
	ped Name: Jeanette Ostman		The state of the s
C	apacity: Incorporator	** NLC Formstante coforganization, p65	W 56566
Si	gnature	amediantis. 2002	IDAHO SECRETARY OF STATE
	/ped Name:	#LLC forms	11/27/2006 05:0 CK: 18299 CT: 2582 BH: 18155

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