



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

NOV 21 PM 1:27
STATE OF IDAHO

1. The name of the limited liability company is:

Foothills Family Insurance, LLC

2. The street address of the initial registered office is:

9601 West State Street Ste 208 Boise, ID 83703

and the name of the initial registered agent at the above address is:

Brian Collins

3. The mailing address for future correspondence is:

9601 West State Street, Ste 208 Boise, ID 83703

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) or 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 |
|---------------|--|
| Brian Collins | 9601 West State Street Ste 208 Boise, ID 83703 |
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: *Brian Collins*

Typed Name: Brian Collins

Capacity: Manager

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE
11/21/2002 05:00
CK: CASH CT: 165167 BH: 647327
1 @ 100.00 = 100.00 ORGAN LLC # 2

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