

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

07 JAN 31 PH 1: 12

(Instructions on back of application)

SECRETARY OF

(**************************************	OF STATE
1. The name of the limited liability con	npany is:
Helga LL	
2. The street address of the initial regis	stered office is:
218 RIO VISTA BLVD. المركزة	
and the name of the initial registered	d agent at the above address is:
HELGA GABRIELLI	
3. The mailing address for future corre	
P.O. BOX 2924, MCCALL, ID 830	638
I. Management of the limited liability co	ompany will be vested in:
Manager(s) or Member(s)	(please check the appropriate box)
member(s), list the name(s) and add	inager. If management is to be vested in the diress(es) of at least one initial member. Address
HELGA GABRIELLI	P.O. BOX 2924, MCCALL, ID 83638
Anthony Gabrielli	P.O. Box 2924 Mccall DD 83638
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Signature of at least one person resp	consible for forming the limited liability company:
Signature: HELGA GARRIELLI	Secretary of State use only
Typed Name: HELGA GABRIELLI Capacity: MEMBER	
Signature Delga Jabriel	∧ //
1 //	IDAHO SECRETARY OF STATE 91/31/2007 05:0 01/31/2007 05:0
Typed Name:	IDAHO SECRETARY OF STATE ##################################

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