



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED/EFFECTIVE

2002 AUG 26 AM 9:28

STATE OF IDAHO

1. The name of the limited liability company is:

Central Idaho Claims, LLC

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

371 West Warm Springs Road, Ketchum, ID 83340

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

Daniel D. Summers

3. The mailing address for future correspondence is:

P.O. Box 1774, Ketchum, Idaho 83340

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
<u>Daniel D. Summers</u>	<u>P.O. Box 1774, Ketchum, Idaho 83340</u>
<u>Sheila Summers</u>	<u>P.O. Box 1774, Ketchum Idaho 83340</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: *Daniel D. Summers*

Typed Name: Daniel D. Summers

Capacity: President

Signature:

Typed Name:

Capacity:

Secretary of State use only

g:\corpforms\LLC forms\arts of organization.pdf
Revised 07/2002

IDAHO SECRETARY OF STATE
08/26/2002 05:00
CK: 1283 CT: 161489 BH: 484619
1 @ 100.00 = 100.00 ORGAN LLC # 2

Web Form

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