	A	RTICLES O	F ORGANIZA1	FILED EFFE
			BILITY COMP	ANY 06 Oct 25   AH 10: 12
1.	The name Mannawa	of the limited liabilit are LLC	y compạny is:	SECRED OF STATE STATE OF IDAHO
2.		address of the initia arnsdale Ct. Boise,	I registered office is: ID 83713	
	and the na Jeffrey B		stered agent at the ab	ove address is:
3.	The mailing address for future correspondence is: 10724 Barnsdale Ct. Boise, ID 83713			
4.	Manageme	ent of the limited liab	ility company will be v	
	Manager(s	s) 🖌 or Member(	S) (please check th	e appropriate box)
5.	lf manager address(es	nent is to be vested s) of at least one initi	in one or more manag al manager. If manag	e appropriate box) er(s), list the name(s) and ement is to be vested in the ast one initial member.
5.	lf manager address(es	nent is to be vested s) of at least one initi	in one or more manag al manager. If manag	er(s), list the name(s) and ement is to be vested in the
5.	lf manager address(es	nent is to be vested s) of at least one initi ), list the name(s) an Name	in one or more manag al manager. If manag d address(es) of at lea	er(s), list the name(s) and ement is to be vested in the ast one initial member.
5.	lf manager address(es member(s)	nent is to be vested s) of at least one initi ), list the name(s) an Name	in one or more manag al manager. If manag d address(es) of at lea	er(s), list the name(s) and ement is to be vested in the ast one initial member. Address
5.	lf manager address(es member(s)	nent is to be vested s) of at least one initi ), list the name(s) an Name	in one or more manag al manager. If manag d address(es) of at lea	er(s), list the name(s) and ement is to be vested in the ast one initial member. Address
5.	If manager address(es member(s)    Signature c	nent is to be vested s) of at least one initi ), list the name(s) an Name ull	in one or more manag al manager. If managed address(es) of at lea	er(s), list the name(s) and ement is to be vested in the ast one initial member. Address
5. 6. \$ S T	If manager address(es member(s) 	nent is to be vested s) of at least one initi ), list the name(s) an Name ull of at least one persor	in one or more manag al manager. If managed address(es) of at lea	er(s), list the name(s) and ement is to be vested in the ast one initial member. Address dale Ct. Boise, ID 83713
5. 6. 3 S T C	If manager address(es member(s) 	nent is to be vested s) of at least one initi ), list the name(s) an Name ull of at least one person	in one or more managed all manager. If managed address(es) of at leased	er(s), list the name(s) and ement is to be vested in the ast one initial member. Address dale Ct. Boise, ID 83713 dale Ct. Boise, ID 83713 secretary of State use only

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