

FILED EFFECTIVE

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 DEC -6 AM 9:52

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

~~XXXXXXXXXXXX~~ TETON PEAKS LLC

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

22 E Butler Ln. Driggs Id. 83422

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

H.J. Harrigan

3. The mailing address for future correspondence is:

P.O. Box 74 Tetonia Id. 83452

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) of 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
H.J. Harrigan	22 E Butler Ln. Driggs Id. 83422

6. Signature of at least one person responsible for forming the limited liability company:

Signature: _____

Typed Name: H.J. Harrigan

Capacity: owner

Signature: H.J. Harrigan

Typed Name: _____

Capacity: _____

Secretary of State use only

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Revised 07/2002

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12/06/2006 05:00
CK: 1113 CT: 207161 BH: 1017815
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