

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

07 AUG 27 PM 4: 15 CTIVE

SECRETARY OF STATE 1. The name of the limited liability company is: STATE OF IDAHO Alpha Process Serving LLC. 2. The street address of the initial registered office is: 903 w. Richmond st. Boise Id. 83706 and the name of the initial registered agent at the above address is: Jeffrey Lynn Hoskins II 3. The mailing address for future correspondence is: 903 W.Richmond st. Boise ID. 83706 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. **Address** Name Jeffrey Lynn Hoskins II 903 w.Richmond st. Boise ID. 83706 Julie Allyn 6. Signature of at least one person responsible for forming the limited liability company: Signature: Jeffrey Lynn Hoskins II Secretary of State use only Capacity: Manager

Signature _____ Typed Name:

Capacity:

IDAHO SECRETARY OF STATE **98/28/2007 95:00**CK: 1259538 CT: 172099 BH: 1072873

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