

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

## FILED/EFFECTIVE

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SECRETARY OF STATE STATE OF IDAHO

	· · · · · · · · · · · · · · · · · · ·	EAT, FINE CATERED CUISINE, LLC	
2.		309 West River St., Hailey ID 83333	
	agent at that address is: Stephanie S. Giacobbi		
3.	The mailing address for future correspondence	e: P.O. Box 753, Ketchum, ID 83340	
A	Management of the limited liability company will be vested in:		
4.			
	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 members, list the name(s) and address(es) of at least one initial member.  Name  Address		
	Stephanie S. Giacobbi	P.O. Box 753, Ketchum, ID 83340	
	6. Signature of at least one person responsible for forming the limited liability company:		
6	$\Theta$		
	Signature Signature Signature	hi 8	
	Typed Name Stephanie S. Giacobl	Secretary of State use only	
	Capacity	Z001	
	Signature	IDAHO SECRETARY OF STATE	
	Typed Name	09/24/2001 05:00 CK: 1595 CT: 2204 BH: 420618	
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