

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

06 FEB -3 PM 3: 81

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability com	pany is:
2.	The street address of the initial regis	tered office is:
	800 FALLS AVENUE, SUITE 1, TWIN FALLS, IDAHO 83301	
	and the name of the initial registered ROBERT E. VEEH	agent at the above address is:
3.	The mailing address for future corres	•
4.	Management of the limited liability co	mpany will be vested in:
	Manager(s) ☐ or Member(s) ✓	(please check the appropriate box)
5.	f 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 nember(s), list the name(s) and address(es) of at least one initial member.	
		` '
	Name	Address
	Name	Address
	Name	Address
	Name	Address
6.	Name ROBERT E. VEEH	Address
	Name ROBERT E. VEEH Signature of at least one person responses to the second	Address 800 Falls Ave., Suite 1, Twin Falls, ID 83301 onsible for forming the limited liability company:
	Name ROBERT E. VEEH Signature of at least one person responsion to the second	Address 800 Falls Ave., Suite 1, Twin Falls, ID 83301 onsible for forming the limited liability company:
	Name ROBERT E. VEEH Signature of at least one person responses to the second	Address 800 Falls Ave., Suite 1, Twin Falls, ID 83301 onsible for forming the limited liability company:
-	Signature of at least one person responsing the second state of th	Address 800 Falls Ave., Suite 1, Twin Falls, ID 83301 onsible for forming the limited liability company:
(Name ROBERT E. VEEH Signature of at least one person responsion to the second	Address 800 Falls Ave., Suite 1, Twin Falls, ID 83301 onsible for forming the limited liability company: Secretary of State use only Though SECRETARY OF STATE