ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application) 15 All 9: 21

| | (| |
|----|--|---|
| | | STATE OF INAMA |
| | The name of the limited liability company is | White Pines Capital, LIC |
| ۱. | The name of the infince income, | |
| | | 7010 N. 17+h St., Boise, ID. 83702 |
| 2. | The address of the initial registered office is: | (not a PO Box) |
| | | and the name of the initial registered |
| | Tomas P Jaski | |
| | agent at that address is:James R. Jaski | 71 / |
| | Signature of registered agent : | |
| | Signature of regions to again | |
| | , | to dia a manager or managers? |
| 3. | Is management of the limited liability compa | NO (check appropriate box) |
| | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | IAO (CIECY abbrohum am) |
| | one or more m | anager(s), list the name(s) and address(es) of at system in the members, list the name(s) and |
| 4. | If management is vested in one of more than | s vested in the members, list the name(s) and |
| | address(es) of at least one initial member. | |
| | Name: | Address: |
| | <u>Marie.</u> | |
| | James R. Laski | 1912 N. 17th St., Boise, ID 83702 |
| | Richard J. Laski | 190 Deerhurst Park Blvd., Kenmore, NY 14217 |
| | RICHARC O. LABORE | E |
| | | |
| | | |
| | | |
| | | *. |
| | | |
| | | |
| 5 | . Signature of at least one person listed in # | to above: |
| | Can K D | |
| | 7 | |
| | | |
| | | Some Secret States of Arts |
| | | 10/16/1998 09:00 |
| | | CX: 1194 CT: 185383 BH: 153839 |
| | | |
| | | Sometics of the second of the |
| | | W7158 |
| | | [₹ W'11× |