ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

(Instructions on back of application) 9 Pi 2: 08

1.	The name of the limited liability company	is: Canggat Fail 184, H.L.C.
2.	The address of the initial registered office in Twin Falls, ID 83301	(not a PO Box)
	agent at that address is: Shawna M. St	and the name of the initial registered
	Signature of registered agent : \(\sqrt{0.1}	i & a Stutzman
3.	Is management of the limited liability compa	any vested in a manager or managers? No (check appropriate box)
	If management is vested in one or more m least one initial manager. If management is address(es) of at least one initial member. Name:	anager(s), list the name(s) and address(es) of at s vested in the members, list the name(s) and Address:
	Shawna M. Stutzman	2509 East 3800 North
		Twin Falls, ID 83301
-	Dan Nutsch	4050 N. 3400 E.
_		Kimberly, ID 83341
لر	Signature of at least one person listed in #4 Shawna M. Stutzman	### SECRETARY OF STATE Secretary of State use only Secretary of State use only