



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2007 JUN 11 AM 8:36

1. The name of the limited liability company is:

RIVER VISTA, LLC

SECRETARY OF STATE  
STATE OF IDAHO

2. The street address of the initial registered office is:

851 N. SKYLINE DR. IDAHO FALLS, ID 83402

and the name of the initial registered agent at the above address is:

TRAVIS WILKINS

3. The mailing address for future correspondence is:

851 N. SKYLINE DR. IDAHO FALLS, ID 83402

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.

Name	Address
<u>TRAVIS WILKINS</u>	<u>851 N. SKYLINE DR. IDAHO FALLS, ID 83402</u>
<u>BERNICE WILKINS</u>	<u>851 N. SKYLINE DR. IDAHO FALLS, ID 83402</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

6. Signature of at least one person responsible for forming the limited liability company:

Signature: *Travis Wilkins*  
 Typed Name: TRAVIS WILKINS  
 Capacity: MANAGER

Signature: *Bernice Wilkins*  
 Typed Name: BERNICE WILKINS  
 Capacity: MANAGER

Secretary of State use only

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 Revised 07/2002

IDAHO SECRETARY OF STATE  
 06/11/2007 05:00  
 CK: 1789 CT: 171497 BH: 1859212  
 1 @ 100.00 = 100.00 ORGAN LLC # 3

Web Form

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