

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

05 APR 25 PM 4: 15

W38895

(Instructions on back of application)

	(III Sti detions on back	(or application)	SECRETABLE OF STATE
1.	The name of the limited liability comp	pany is:	STATE OF IDAHO
2.	The street address of the initial registered office is: 100 North 9th Street, Suite 310, Boise, Idaho, 83702		
	and the name of the initial registered Scott Cockerham		ess is:
3.	The mailing address for future correspondence is: P.O. Box 4067, Boise, Idaho, 83711		
4.	Management of the limited liability co Manager(s) ☐ or Member(s) ✓	_	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	
	Scott Cockerham	P.O. Box 4067, Boise,	Idaho, 83711
3	Signature of at least one person responsion to the second		ited liability company: Secretary of State use only
(Capacity: Member		