

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

05 MAR 28 PM 3: 49

1.	The name of the limited liability comp	eany is:	SECREMENT OF STATE STATE OF IDAHO
2.	The street address of the initial registered office is:		
	1212 W. Stafford Drive, Eagle, ID 83616		
	and the name of the initial registered a	agent at the above address is:	
3.	The mailing address for future correspondence is: 1212 W. Stafford Dr., Eagle, ID 83616		
4.	Management of the limited liability company will be vested in:		
	Manager(s) or Member(s)	(please check the appropriate box)	
	management is to be vested in one or more manager(s), list the name(s) and ddress(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	Addre	5 S
	Rhoda L. Brunelli	1212 W. Stafford Dr., Eagle	, ID 83616
	Gordon L. Edwards	1208 W. State St., Eagle, ID	
6.	Signature of at teast one person respo	onsible for forming the limited l	iability company:
	signature:		ry of State use only
	yped Name: Rhoda Brunelli	ago Deg	., c. auto duo otty
(Capacity: Trustee-Edwards Family Re	ev. Trust	
		: E	
	ignature	C forms:	
T	ignature ypedName: _Gordon Edwards apacity: Trustee-Edwards Family Re	Workstand of 20002	IDANO SECRETARY OF STATE

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