ARTICLES OF ORGANIZATIONLED/EFFECTIVE LIMITED LIABILITY COMPANY 00 NOV 29 AM 8: 54 (Instructions on back of application) DEC 18 PM 3: 2 SCUME BARY OF STATE STATE OF IDAHO STATE OF IDAHO 1. The name of the limited liability company is: BLACK JADE ENTERPRISES, L.L.C 2. The address of the initial registered office is: 610 North 5th West, St. Anthony, ID 83445 (not a PO Box) — and the name of the initial registered agent at that address is: ____D. BLAINE SHARP Signature of registered agent: D. Blaine Sharp 3. The latest date certain on which the limited liability company will dissolve: 12/31/2030 4. Is management of the limited liability company vested in a manager or managers? L. Yes No (check appropriate box) 5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member. Name: Address: D. BLAINE SHARP 610 N. 5th W., St. Anthony, ID 83445 JANICE SHARP 610 N. 5th W., St. Anthony, ID 83445 6. Signature of at least one person listed in #5 above: D. Blanc Skar

ISONO SECRETARY OF STATE

11/29/2000 09:00 CK: 468 CF: 139817 BH: 363375

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