

ARTICLES OF ORGANIZATION FILED/EFFECTIVE

(Instructions on back of application)

1.	The name of the limited liability company is: _	SECHE ASS OF STATE STATE OF IDAHO Arrowhead Financial Services, LLC
2.	The street address of the initial registered office	∋ is: _ 55 N. Main, Driggs, Idaho 83422
	agent at the above address is: TRAVIS THOMPS	and the name of the initial registered
3.	The mailing address for future correspondence: 55 N. MAIN, DRIGGS, IDAHO 83422	
4.	Management of the limited liability company will be vested in: Manager(s) or Member(s) (x) . (please check the appropriate box)	
5.	management is to be vested in one or more manager(s), list the name(s) and address(es) of least one initial manager. If management is to be vested in the members, list the name(s) and dress(es) of at least one initial member. Name Address	
	TRAVIS THOMPSON, INC. 55	5 N. Main, Driggs, Idaho 83422
6. Signature of at least one person responsible. Signature		rforming the limited liability company:
	Typed Name GREG M. MORTENSEN Capacity ORGANIZER	Secretary of State use only Secretary of State use only
	Signature	ms and only
	Typed Name	IDAHO SECRETARY OF STATE 10

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