

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

Capacity: _____

03 DFC -2 PH 4:54 (Instructions on back of application) STATE OF IDAHO 1. The name of the limited liability company is: T.L.B. Consulting and Development Services, LLC 2. The street address of the initial registered office is: 400 S. Granite Way, Boise, ID 83712 and the name of the initial registered agent at the above address is: Tom Bauwens 3. The mailing address for future correspondence is: 400 S. Granite Way, Boise, ID 83712 4. Management of the limited liability company will be vested in: (please check the appropriate box) Manager(s) v or Member(s) 5. If management is to be vested in one or more manager(s), list the name(s) and address(es) or 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. Address Name 400 S. Granite Way, Boise, ID 83712 Tom Bauwens 6. Signature of at least one person responsible for forming the limited liability company: Secretary of State use only Signature: Signature Typed Name: Tom Bauwens Capacity: Manager Signature _____ IDAHO SECRETARY OF STATE Typed Name: _____

12/03/2002 05:00 CK: 2636 CT: 165427 BH: 649827 1 0 100.00 = 100.00 ORGAN LLC # 2

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