

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

PLED/EFFECTIVE

(Instructions on back of application)

01 MAR 19 AM 9: 55

| 1. | The name of the limited liability company   | STATE OF IDAHO   | _       |
|----|---|--|---------|
| 2. | The address of the initial registered office is   | is: 201 N. 8th Street,   | -       |
|    | St. Maries, ID 83861  agent at that address is: Mandi Mueller   | and the name of the initial registere  | -<br>ed |
| 3. | The mailing address for future corresponden   | nce:201 N.8th, St. Maries ID   | •       |
| 4  | 83361 Management of the limited liability company   |  |         |
|    | Manager(s) x or Member(s) . (please chee  | eck the appropriate box)   |         |
| 5. | If management is to be vested in one or more at least one initial manager. If management is address(es) of at least one initial member.  Name | re manager(s), list the name(s) and address(es) of is to be vested in the members, list the name(s) an           | ď       |
|    | <del></del>   | Address<br>nCO 4 Box 38C   |         |
| -  | Mandi Mueller   | St. Maries, ID 83861   |         |
| -  | Brent Mueller   | HCO 4 Box 38C<br>St. Maries, ID 83861  |         |
|    |   |  |         |
| -  |   |  |         |
| -  |   |  |         |
|    | Signature of at least one person responsible fo   | or forming the limited liability company:  |         |
|    | Signature Mande W weller  |  |         |
|    | yped Name Mandi Mueller   | E LONGO SELECTIONS OF STOTE ONLY   | _}      |
|    | Capacity Owner Signature 18-  | 100 100 SECRETARY OF SIGNEY  93/20/2001 69:00  CK: 3833 CT: 143818 BH: 385607  1 8 188.86 = 180.80 ORGAN LLC # 2 |         |
|    | Signature Sur Mueller   |  |         |
|    | yped Name Brent Mueller   | W14768   |         |
| U  | apacity <u>DWNU</u>   | W14/60   |         |