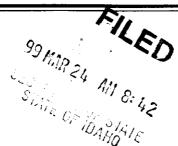


## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)



|  | DAHAIE   |
|--|--|
| The name of the limited liability compan         |  |
| The address of the initial registered offic      | eis: _2016 Sun Valley Circle   |
| Twin Falls, ID 83301                             | and the name of the initial registered   |
| agent at that address is:Virginia A              |  |
| 11.  |  |
| Signature of registered agent : Mg               | ena a fyele  |
| ,  |  |
| Is management of the limited liability cor       | mpany vested in a manager or managers?   |
|  | NO (check appropriate box)   |
|  | THE CONTRACTOR OF THE CONTRACT |
| If management is vested in one or more           | e manager(s), list the name(s) and address(es) of at   |
|  | nt is vested in the members, list the name(s) and  |
| address(es) of at least one initial member Name: | Address:   |
| <del></del>                                      | 2016 Sun Valley Circle, Twin Falls, ID   |
| Virginia A. Kezele                               |  |
|  | 83301  |
|  | !<br>  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | y ·  |
| Signature of at least one person listed in       | n #4 above:  |
| Migenia Wille                                    | <del></del>  |
| VIRGINIA A. KEZELE                               |  |
|  | IDANO SECRETARY OF STATE   |
|  | 83/24/1999 69:80<br>8 CK: 224 CV: 11341 W: 20119   |
|  | 1 \$ 188.86 = 188.86 ORSON LLC # 2   |
|  | 2  |
|  | in 8350  |
|  |  |