

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

7003 FEB 26 AM 8: 47

| 1. | The name of the limited liability com | pany is: | STATE OF IDAHO |
|-------------|---|---------------------------------|---|
| | Nebahoma Consulting, LLC | | WE OF IDAMO |
| 2. | The street address of the initial regis | tered office is: | |
| | 418 S. 9th Street, Suite 201 BOise | e, ID 83702 | |
| | and the name of the initial registered Jefferson Jewell | agent at the above address | is: |
| 3. | The mailing address for future correspondence is: 418 S. 9th Street, Suite 201 Boise, ID 83702 | | |
| 4. | Management of the limited liability company will be vested in: | | |
| | Manager(s) or Member(s) (please check the appropriate box) | | |
| 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. | | |
| | Name | Address | |
| | Jefferson Jewell | 418 S. 9th Street, Suite 2 | 01 Boise, ID 83702 |
| | | | |
| | | | |
| | Signature of at least one person respo | onsible for forming the limited | d liability company: |
| 5 | Signature of at least one person responsion of the second | | d liability company: etary of State use only |
| 5 7 0 | Signature: yped Name: Jefferson Jewell Capacity: Member | | etary of State use only IDAHO SECRETARY OF STATE |
| S C S | Signature: yped Name: Jefferson Jewell Capacity: Member | C forms lartsoforganization p65 | etary of State use only |

 $= \frac{1}{2} \int_{0}^{\infty} d^{2} d^$