

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2005 SEP 12 AH 9: 10

1.	The name of the limited liability cor	mpany is:	SECRETATION OF STATE
	Livermore Lake, LLC		STATE OF IDAHO
2.	The street address of the initial registered office is:		
	61 Shadow Cove Lane, Cocolalla, ID 83813		
	and the name of the initial registere Ron Hazel	d agent at the above	address is:
3.	The mailing address for future corre P.O. Box 189, Cocolalla, ID 8381		
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) of 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
	Ron Hazel	61 Shadow Cove	Lane, Cocolalla, ID 83813
	Signature of at least one plerson resp	onsible for forming th	ne limited liability company:
S	Signature of at least one person resp signature:	ı —	ne limited liability company: Secretary of State use only
S T C	yped Name: Ron Hazel	formslartsotorganization p65	· •

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