



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

Illinois Ave. Property LLC

2. The street address of the initial registered office is:

241 SW 3rd St. Fruitland, ID 83619

and the name of the initial registered agent at the above address is:

Kevin Shoemaker

3. The mailing address for future correspondence is:

PO Box 205 Fruitland, ID 83619

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
<u>Kevin Shoemaker</u>	<u>7170 Denver Rd. Fruitland, ID</u>
<u>Jeretta Shoemaker</u>	<u>7170 Denver Rd. Fruitland, ID</u>

6. Signature of at least one person responsible for forming the limited liability company:

Signature: _____

Typed Name: Kevin Shoemaker

Capacity: Manager

Signature: Jeretta Shoemaker

Typed Name: Jeretta Shoemaker

Capacity: Manager

Secretary of State use only
01/30/2004 05:00
CK: 1473 CT: 175181 BH: 724586
1 @ 100.00 = 100.00 ORGAN LLC # 2
g:com/llc/forms/stateoforganization.pdf
Revised 07/2002

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01/30/2004 05:00
CK: 1473 CT: 175181 BH: 724586
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