

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY 2005 DEC 19 AM 9: 09

(Instructions on back of application)

| 1. | The name of the limited liability comp  | pany is:  | SECRETARY OF STATE STATE OF IDAHO                  |  |
|----|---|---|--|--|
| 2. | The street address of the initial registered office is: 44 Depot Way, Victor, Idaho 83455   |   |  |  |
|    | and the name of the initial registered agent at the above address is:  Debra J. Herman  |   |  |  |
| 3. | The mailing address for future correspondence is: PO Box 412, Victor, Idaho 83455   |   |  |  |
| 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  |  |
|    | Debra J. Herman   | PO Box 412, Victo   | r, Idaho 83455                                     |  |
|    | Russell Herman  | PO Box 412, Victor, Idaho 83455                                 |  |  |
|    |   |   |  |  |
|    |   |   |  |  |
|    | 10.   |   |  |  |
|    | 6. Signature of at least one person responsible for forming the limited liability company:  |   |  |  |
|    | Signature: Debra J Herman   |   | Secretary of State use only                        |  |
|    | Capacity: Organizer   | nization  |  |  |
|    |   | -tsoforga   | W45615   |  |
| 5  | Signature   | formstar<br>72002   | IDAHO SECRETARY OF STATE                           |  |
| 7  | yped Name:  | orp/forms/L.C. forms/artsoforganization, p65<br>Revised 07/2002 | 12/19/2005 05:00<br>CK: 10977 CT: 85207 BH: 927568 |  |
|    | Capacity:   | corp/form   | 1 @ 100.00 = 100.00 ORGAN LLC # 2                  |  |