

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 OCT 13 AM 8: 43

| SECRETARY OF STATE STATE OF IDAHO | |
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| ame(s) and vested in the nember. | |
| 958 | |
| TPELIER, ID 83254 | |
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| liability company: | |
| tary of State use only | |
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| • | The name of the limited liability comp | pany is: | STATE OF IDAHO |
|--------|---|---|--|
| | A & J ENTERPRISES LLC | | |
| •• | The street address of the initial regist | ered office is: | |
| | 839 WASHINGTON STREET MC | ONTPELIER, ID 83254 | |
| | and the name of the initial registered | agent at the above addre | ess is: |
| | ATHENA REID | | |
| | | nondence is: | |
| 3. | The mailing address for future corres | | |
| | 839 WASHINGTON ST MONTP | | |
| 4. | Management of the limited liability co | mpany will be vested in: | |
| | Manager(s) or Member(s) | (please check the appropriate | e box) |
| • | If management is to be vested in one address(es) of at least one initial ma member(s), list the name(s) and add | nager. If management is | nitial member. |
| | Name | | Address |
| | ATHENA REID | 839 WASHINGTON | MONTPELIER, ID 83254 |
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| | | | |
| 6 | Signature of at least one person res | ponsible for forming the l | imited liability company: |
| O. | Signature: | <i>y</i> | Secretary of State use only |
| | Typed Name: ATHENA REID | Section 1 | Gedetaly of Otate and Stay |
| | Capacity: MANAGER | and the second | |
| | | copidometi 1.C femelaribotingarization p65 Revised 07/2002 | IDAHO SECRETARY OF S |
| | Signature | omek LC former | 10/13/2006 0 CK: 995 CT: 205419 BH: |
| | Typed Name: | 7 9 | 1 2 190.90 = 108.90 ORG |
| | Typed Name: | | 1 6 100100 100100 |

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