

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)



1.	The name of the limited liability company	is: Professional Ho	STATE TECTIONS LLC
2.	The street address of the initial registered of	fice is: 10000 West	Los Ranchitos Drive,
	Boise, Idaho 83709	and the	name of the initial registered
	agent at the above address is: Robert A.		
3.	The mailing address for future corresponden	ce: 10000 West Los	Ranchitos Drive,
	Boise, Idaho 83709		
4.	Management of the limited liability company will be vested in:		
	Manager(s) ☐ or Member(s) ☐ . (please che	ock the appropriate box)	
5.	i. If management is to be vested in one or more manager(s), list the name(s) and addres at least one initial manager. If management is to be vested in the members, list the national address(es) of at least one initial member. Name Address		
	Robert A. Peck	10000 West Los R	anchitos Drive
		Boise, Idaho 837	ng
		borse, ruano on	72
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6.	Signature of at least one person responsible	for forming the limited	l liability company:
	Signature <u>Robert Q. Peuc</u>		
	Typed Name_ROBERT A. PECK		Secretary of State use only
	Capacity Member Manager	Inc	
	Signature	forms lartaciong an ization p85 gavised 01/2001	
	Typed Name	formsk	
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