

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

| 1. | The name of the limited liability complete Johnston-Seid Realty LLC. | pany is: | SECRETARY OF STATE STATE OF IDAHO |
|----|---|--|--|
| 2. | The street address of the initial registered office is: | | |
| | 5235 N. Toscana St. Meridian, ID. 83642 | | |
| | and the name of the initial registered Travis C. Johnston | agent at the above address | is: |
| 3. | The mailing address for future correspondence is: 5235 N. Toscana St. Meridian ID. 83642 | | |
| 4. | Management of the limited liability company will be vested in: | | |
| | Manager(s) ✓ or Member(s) (please check the appropriate box) | | |
| | 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 | Name Address | |
| | Travis C. Johnston | 5235 N. Toscana St. Meridian,ID. 83642 | |
| | Mandy D. Johnston | 5235 N. Toscana St. Merid | |
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| | Signature of at least one person response | onsible for forming the limited | liability company: |
| Т | Signature: <u>Jrws C. 4 Att</u> Typed Name: <u>Travis C. Johnston</u> Capacity: <u>Manager</u> | Secre Secre | etary of State use only |
| T | Signature yped Name: Mandy D. Johnston | NormsULC forms artsolorganization, p65 Revised 07/2002 | IDAHO SECRETARY OF STATE 02/09/2006 05:0 CK: CASH CT: 196842 RH: 937 1 0 100.00 = 100.00 DRGAN HI |
| | Capacity: Manager | ହୁ ଫୁ | TOOLDD DIVIDNIA F |

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