-, 1 .	RTICLES OF OF IMITED LIABILIT (Instructions on back	TY COMP	ANY
2.	The address of the initial registered office is	s : _11300 Ashl	
		(nôt a PO Box)	nd the name of the initial registered
	agent at that address is: Lawrence J. St		nd the name of the initial registered
	Signature of registered agent :		
3.	Is management of the limited liability compared	any vested in a	manager or managers?
	∑ Yes	NO (check appr	
4.	If management is vested in one or more m least one initial manager. If management is address(es) of at least one initial member.	s vested in the	members, list the name(s) and
	Name:		ddress:
	Lawrence J. Smith	11300 Ashbut	rton,Drive, Boise, ID 83709
			·
			·
		••••••••••••••••••••••••••••••••••••••	
			V . * W
5.	Signature of at least one person listed in #5	above	
•. <	Farment Same		4.
			Secretary of State use only
		LOG Pessive	IDAHO SECRETARY OF STATE
		Revised	IDAHO SECRETARY OF STATE 05/28/1998 09:00 CK: 1838 CT: 99294 BH: 114397
			IDAHO SECRETARY OF STATE 05/28/1998 09-00

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