

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY 05 OCT 11 PM 3: 14

(Instructions on back of application)

1.	The name of the limited liability comp	pany is:	S	ECHEL OF STATE STATE OF IDAHO
2.	The street address of the initial regist 2627 W Idaho St Boise, ID 83702		s:	
	and the name of the initial registered Paul Augustine	agent at the	above ad	dress is:
3.	The mailing address for future correspondence is: 619 E State St Eagle, ID 83616			
4. Management of the limited liability company will be vested in:				n:
	Manager(s) or Member(s)	(please che	ck the appropr	iate box)
5.	management is to be vested in one or more manager(s), list the name(s) and ddress(es) of at least one initial manager. If management is to be vested in the nember(s), list the name(s) and address(es) of at least one initial member.			
	Name	Address		
	Juli Van Wyk	619 E Stat	e St Eag	gle, ID 83616
	ignature of at least one person responsible for forming the limited liability company:			
	Signature: <u>HW l'Al l</u> FypedName: Jilli Van Wyk	00	<b>59</b>	Secretary of State use only
	Capacity: member		enization	
	,		corptomstLC formstartsoforganization p65 Revised 07/2002	
5	Signature		Corms\s	
T	yped Name:	<del></del>	forms/LLC forms/ Revised 07/2002	IDAHO SECRETARY OF STATE
(	Capacity:		ου R.	10/11/2005 05:00 CK: 9307 CT: 193153 BH: 91636

W43582