



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY APR -3 PM 2: 22

(Instructions on back of application)

STATE OF IDAHO

1.	The name of the limited liability compa	any is:	.: 5-19 13.4
2.	The street address of the initial registered office is: 2748 Breneman ST., Boise, Idaho 82702		
	and the name of the initial registered a Mary S. Alvord	gent at the above address is:	
3.	The mailing address for future correspondence 2748 Breneman St., Boise, Idaho 83		
4.	Management of the limited liability company will be vested in:		
	Manager(s) v 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) or 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	Address	
		Address	
	Name	Address	
	Name Mary S. Alvord	Address	
	Mary S. Alvord 2748 Breneman St.	Address	
	Mary S. Alvord 2748 Breneman St.	Address	
	Mary S. Alvord 2748 Breneman St.	Address	
	Mary S. Alvord 2748 Breneman St. Boise, Idaho 83702		
	Mary S. Alvord 2748 Breneman St. Boise, Idaho 83702 Signature of at least one person response.	nsible for forming the limited liability comp	
S	Mary S. Alvord 2748 Breneman St. Boise, Idaho 83702 Signature of at least one person responsionature:	nsible for forming the limited liability comp	
S	Mary S. Alvord 2748 Breneman St. Boise, Idaho 83702 Signature of at least one person response.	nsible for forming the limited liability comp	
S T C	Mary S. Alvord 2748 Breneman St. Boise, Idaho 83702 Signature of at least one person responsignature: Typed Name:	nsible for forming the limited liability comp	TARY OF STATE
S T C	Mary S. Alvord 2748 Breneman St. Boise, Idaho 83702 Signature of at least one person responsignature: Typed Name: Capacity: Typed Name:	Secretary of State use of State	TARY OF STATE

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