FILED EFFECTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability comp	pany is: STATE OF IDAHO
2.	The street address of the initial registed 680 EAST HAVASUPAI STREET, I	
	and the name of the initial registered	agent at the above address is:
3.	. The mailing address for future correspondence is: 1010 NORTH COLE ROAD, BOISE, IDAHO 83704	
4.	Management of the limited liability company will be vested in:	
	Manager(s) or Member(s)	
5.	5. 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	Address
	LAURI A NITZ	680 E HAVASUPAI ST, MERIDIAN ID 83646
	MICHAEL J NITZ	680 E HAVASUPAI ST, MERIDIAN ID 83646
6.	Signature of at least one person resp	onsible for forming the limited liability company:
	Signature: With NITT	Secretary of State use only
	Typed Name: LAURI A NITZ Capacity: MEMBER	Secretary of State use only
	Typed Name: LAURI A NITZ	Secretary of State use only Secretary of State use only Secretary of State use only

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