



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

1. The name of the limited liability company is:

BANKRUPTCY CLAIMS RECOVERY, LLC

2. The street address of the initial registered office is:

4269 WILLOW CANYON DRIVE, IDAHO FALLS, ID 83406

and the name of the initial registered agent at the above address is:

BRITNEY WATSON

3. The mailing address for future correspondence is:

P.O. BOX 2136, IDAHO FALLS, ID 83403-2136

4. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

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
<u>BRITNEY WATSON</u>	<u>4269 WILLOW CANYON DRIVE, IF, ID 83406</u>
<u>JASON WATSON</u>	<u>4269 WILLOW CANYON DRIVE, IF, ID 83406</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: [Signature]

Typed Name: BRITNEY WATSON

Capacity: MEMBER

Signature: [Signature]

Typed Name: JASON WATSON

Capacity: MEMBER

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE
09/23/2005 05:00
CK: 430340091 CT: 165784 DH: 913223
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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