

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

| • | , | 2006 SFP 27 |
|---------------------------------------|--|---|
| 1. The name of the limite | ed liability company is: | 2006 SEP 27 AM 8: 42 |
| Modern C | onstruction a | of Idano DESTATE |
| 2. The street address of the | the initial registered office is: | OF IDAHO |
| 550 maxin | re Lo himber | w. 1d 83341 |
| | itial registered agent at the at | |
| _ | Stanger | |
| 3. The mailing address for | G | |
| <u>_</u> | line Ln Kimh | perlu, 1d 83341 |
| | ited liability company will be v | |
| Manager(s) X or M | | |
| | | the appropriate box) |
| address(es) of at least of | vested in one or more manag one initial manager. If manag ne(s) and address(es) of at le | gement is to be vested in the |
| Name | | Address |
| Derek Stano | er Formvir | ne in Kimberly, 1d 83341 |
| John Holland | | St N Hazelton Id 8334 |
| | | 2 21 14 114 20 1161 1161 603 |
| | | |
| | | |
| | | |
| | | |
| 6. Signature of at least one | poreop esponsible for form | ing the limited liability company: |
| | | |
| Signature: | g (m) | Secretary of State use only |
| Typed Name: Dereve | Stanger 1 | Secretary of State use only |
| | Stanger uppermentage | IDAHO SECRETARY OF STATE |
| Typed Name: Dereve | Stange R | IDAHO SECRETARY OF STATE 89/27/2006 05:00 |
| Typed Name: Derever Capacity: Morroge | S S S S S S S S S S S S S S S S S S S | IDAHO SECRETARY OF STATE 09/27/2006 05:00 CK: 938 CT: 284867 BH: 977363 |