ARTICLES OF ORGANIZATIONLED LIMITED LIABILITY COMPANY

(Instructions on back of application) 44



SECRETARY OF STATE STATE OF IDAHO

The address of the initial registered office is:501 W. Broadway. Suite 300A		
	aho Falls, ID 83402	
agent	at that address is:Lor	anie Mollberg and the name of the initial registe
Signa	ture of registered agent:	
s mar	nagement of the limited lia	bility company vested in a manager or managers?
	▼ Yes	No (check appropriate box)
f management is vested in one or more manager(s), list the name(s) and address(es) of a		
east c	one initial manager. If mar ss(es) of at least one initial	nagement is vested in the members, list the name(s) and
iuui 63	Name:	Address:
Lo	nnie Mollberg	501 W. Broadway, Suite 300A
		Idaho Falls, ID 83402
		Tuano raris, 1D 03402
-,,,,,,		
Signat	ure of at least one person	
Signat	ure of at least one person	
Signat	ure of at least one person	
Signat	ure of at least one person	
Signat	ure of at least one person	listed in #4 above:
Signat	ure of at least one person	listed in #4 above: The property of State
Signat	ure of at least one person	listed in #4 above: