



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2004 JAN -2 AM 9:21

STATE OF IDAHO

1. The name of the limited liability company is:

STRIKE ZONE, LLC

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

1811 N. YELLOWSTONE IDAHO FALLS, IDAHO 83401

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

SHARON HOWE

3. The mailing address for future correspondence is:

329 S. WOODRUFF IDAHO FALLS, IDAHO 83401

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

SHARON HOWE

751 KELSEY

IDAHO FALLS, IDAHO 83401

6. Signature of at least one person responsible for forming the limited liability company:

Signature: Sharon M. Howe

Typed Name: SHARON HOWE

Capacity: MANAGER

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

9:40pm/01/02/2004 LL Clonms/latisc/organization p65
Revised 07/2002

IDAHO SECRETARY OF STATE
01/02/2004 05:00
CX: 1000 CT: 175414 BH: 719540
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