

ARTICLES OF ORGANIZATION MITED LIABILITY COMPANY

2005 OCT 7 MH 8:58

| # | (Instructions on back of application) | DECRETANT OF STATE |
|----|---|---|
| 1. | The name of the limited liability company is: | Similar to the second |
| 2. | The street address of the initial registered office is: | |
| | 12344 10WA AVE | |
| | and the name of the initial registered agent at the above add | |
| 3. | The mailing address for future correspondence is: | |
| | 12344 10WA AVE NAMPA 10 | . 83686 |
| 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), I address(es) of at least one initial manager. If management member(s), list the name(s) and address(es) of at least one | is to be vested in the |
| | Name | Address |
| | C. J. HOUSON 12344 10WA | AUE NAMPA ID 85686 |
| | | |
| | | |
| 6 | Signature of at least one person responsible for forming the | e limited liability company: Secretary of State use only |
| | Typed Name: C. J. Houson | |
| | Typed Name: 8 | |
| | Typed Name: C. J. HouseN | |
| | Capacity: MEMBER 2002 | IDANO SECRETARY OF STOTE |
| | \ <u>*</u> | IDAHO SECRETARY OF STATE 10/07/2005 05:00 CK: 1812 CT: 193854 BH: 91583 |

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