

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1.	The name of the limited liability com	npany is:	Alifa _{Tr}
2.	The street address of the initial registered office is: 430 West Park; American Falls, ID 83211		
	and the name of the initial registered M. Dan Hammond	d agent at the above	address is:
3.	The mailing address for future correspondence is: 430 West Park; American Falls, ID 83211		
4.	The limited liability company will be:		
	Manager-managed or Member-managed (please check the appropriate box)		
5.	If manager-managed, list the name(s) and address(es) of at least one initial manage of the state		
***************************************	Karen Hammond	430 West Park; Am	erican Falls, ID 83211
6. Signature of at least one person responsible for forming the limited liability company: Signature: Typed Name: Karen Hammond Capacity: Managing Member Secretary of State use only			
-	Signature	rpWormsVLC formslarts Revised 05/2007	IDAHO SECRETARY OF STATE 05/19/2008 05:06 CK: 275146 CT: 218534 BH: 11158 1 8 188.88 0RGAN LLC

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