FILED ETTECTIVE



Capacity: _

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

2006 JUN 14 AM 9:39

(Instructions on back of	fapplication)	SEGNETADA
ne name of the limited liability compa	iny is:	STATE OF PONE
Guchiebird's LLC		<u> </u>
he street address of the initial registe	red office is:	
160 East Little Avenue Driggs, ID 83	3422	
nd the name of the initial registered a	gent at the above addre	ess is:
Mary Lisa Lombardi		
he mailing address for future corresp	ondence is:	
P.O. Box 752 Driggs, ID 83422		
Management of the limited liability con	npany will be vested in:	
		e box)
address(es) of at least one initial man- member(s), list the name(s) and addre Name	ess(es) of at least one in	nitial member. Address
Mary Lisa Lombardi	P.O. Box 752 Driggs	, ID 83422
		,
	ensible for forming the	limited liability company:
Signature of at least one person resp	<i>.</i>	limited liability company:
Signature: M. Z. Zombard	<i>.</i>	limited liability company: Secretary of State use only
Signature of at least one person responding the Signature: M. Z. Zombardi Typed Name: Mary Lisa Lombardi Capacity: Member	<i>.</i>	limited liability company: Secretary of State use only
Signature: <u>M. Z. Z<i>ombard</i>i</u> Typed Name: <u>Mary Lisa Lombardi</u>	mstartsoftriganization.p65	limited liability company: Secretary of State use only IDAHO SECRETARY OF STATE
(H	ne name of the limited liability compared by the street address of the initial register 160 East Little Avenue Driggs, ID 8 and the name of the initial registered at Mary Lisa Lombardi the mailing address for future correspondent of the limited liability confidence of the limited l	the street address of the initial registered office is: 160 East Little Avenue Driggs, ID 83422 Ind the name of the initial registered agent at the above address. Mary Lisa Lombardi The mailing address for future correspondence is: P.O. Box 752 Driggs, ID 83422 Management of the limited liability company will be vested in: Manager(s) or Member(s) (please check the appropriate address(es) of at least one initial manager. If management is member(s), list the name(s) and address(es) of at least one in the name

L @ 100.00 = 100.00 ORGAN LLC

W5/664