

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY

O7 OCTA	
SECRETARY	AH 8: 10
STATARY	DC -
SECRETARY STATE OF	IDAHOTE

47	(Instructions on back	or application	on)	STAPARY DO	
1.	The name of the limited liability con The MF5 Group LLC	npany is:		STATE OF IDAHO	
2.	The street address of the initial regis				
	and the name of the initial registered DeLane A. Fullmer	d agent at th	e above addre	ess is:	**1 .
3.	The mailing address for future corre	•	,		
4.	The limited liability company will be:				
	Manager-managed  or Member	r-managed	✓ (please ch	eck the appropriate box)	
5.	If manager-managed, list the name(s If member-managed, list the name(s Name			ast one initial member.	
	DeLane A. Fullmer	4408 W. S	addle Ridge, l	Nampa, Idaho 83687	
	Greg C. Mayes	2607 Willo	wbrook, Caldy	vell, Idaho 83605	
	Leona R. Fouts	516 N. Ge	orgia Ave., Ca	Idwell, Idaho 83605	
6.	Signature of at least one person res	ponsible for	forming the lin	nited liability company:	
	Signature Terret Onde Typed Name Leona R. Fouts	· · · · · · · · · · · · · · · · · · ·	S S	ecretary of State use only	
	Capacity: Chief Financial Officer		rgereiz edio		
•	Signature		copytomstLLC formatersoforgenization.pmd Revised 65/2007	IDAHO SECRETARY OF STATE 16/31/2007 05=00 CK: 4905 CT: 147886 BH: 1883233	3