FILED 7

ARTICLES OF ORGANIZATION

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

| | Olyse of Tours | |
|-------------|---|---|
| 1. | The name of the limited liability company i | s: Driscoll-Fawcett McCall LLC |
| 2 . | | s: <u>583 River Road, Bliss, Idaho 83314</u> (nota PO Box) |
| | agent at that address is:Lynn_Fawcett | and the name of the initial registered |
| | Signature of registered agent : | |
| 3. | Is management of the limited liability compa | any vested in a manager or managers? No (check appropriate box) |
| | ieast one initial manager. If management is address(es) of at least one initial member. | anager(s), list the name(s) and address(es) of at vested in the members, list the name(s) and |
| | Name: | Address: |
| | ynn Fawcett Whiting | 583 River Road, Bliss, Idaho 83314 |
| | | |
| | | |
| | | |
| - - - | Signature of at least one person listed in #5 | above: |
| | Lynn Fawcett Whiting | - Unitable Whiting |
| | | IDAHO SECRETARY OF STATE |
| | | @1/08/1998 09:00 CK: none CT: 1117 BH: 71104 |
| | | CK: none CT: 1117 BH: 71104 1 8 100.00 = 100.00 ORGAN LLC 1 8 20.00 = 20.00 EXPEDITE C |
| | | 1 # SNIMM = SNIMM FXCEDITE C |
| | | 7/15321 |