



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12/22/2006 05:00

1. The name of the limited liability company is:

Teton Adventures LLC

2. The street address of the initial registered office is:

11168 N. Crooked Tree Lane

and the name of the initial registered agent at the above address is:

Jim T. Crittenden

3. The mailing address for future correspondence is:

11168 N. Crooked Tree Lane, Idaho Falls, Id. 83401

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), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name	Address
<u>Jim T. Crittenden</u>	<u>11168 N. Crooked Tree Lane</u>
	<u>Idaho Falls, Idaho</u>
	<u>83401</u>
<u>Erin B. Crittenden</u>	<u>11168 N. Crooked Tree Lane</u>
	<u>Idaho Falls, Idaho</u>
	<u>83401</u>

6. Signature of at least one person responsible for forming the limited liability company:

Signature: [Signature]
 Typed Name: Jim T. Crittenden
 Capacity: Owner

Secretary of State use only

Signature: [Signature]
 Typed Name: Erin B. Crittenden
 Capacity: Owner

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 Revised 07/2002

IDAHO SECRETARY OF STATE
 12/22/2006 05:00
 CK: 5395 CT: 207771 BH: 1021308
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