



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2005 OCT 14 AM 8:51

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Student Health Insurance, LLC

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

859 S. Yellowstone, Suite 200, Rexburg, Idaho 83440

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

Justin G. Hyde

3. The mailing address for future correspondence is:

859 S. Yellowstone, Suite 200, Rexburg, Idaho 83440

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>Justin G. Hyde</u>	<u>600 Pioneer Rd, No. 306, Rexburg, ID 83440</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

Signature: *Justin Hyde*

Typed Name: Justin G. Hyde

Capacity: Member

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

g:\corp\forms\LLC\forms\arts\organization.d65
Revised 07/2002

IDAHO SECRETARY OF STATE
10/14/2005 05:00
CK: 23143 CT: 2552 BH: 916937
1 @ 100.00 = 100.00 ORGAN LLC # 2

W43663