

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY May 26 3 42 PM 'S3

FILED

(Instructions on back of application)

		SECT FER 100 STATE	
1.	The name of the limited liability company is: Afriventures, LLC		
2.	2. The address of the initial registered office is: 1519 (not a PO Bo	(x)	
	agent at that address is: Petrina Destro	- and the name of the initial registered	
	$\Im 1$		
	Signature of registered agent:	SHO	
3.	Is management of the limited liability company vested in a manager or managers?  Yes No (check appropriate box)		
4.	If management is vested in one or more manager(s), list the name(s) and address(es) least one initial manager. If management is vested in the members, list the name(s) an address(es) of at least one initial member.  Name:  Address:		
	Petrina Destro 1519 N.	14th, Boise ID 83702	
5.	5. Signature of at least one person listed in #4 above:	•	
	le tima Desto		
		INNO SECRETARY OF STATE Secretary of State use only 95/26/1999 99:00	
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