



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

05 JAN 11 AM 11:52

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ALR L.L.C.

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

995 EAST GARFIELD GLENNS FERRY, ID 83623

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

ROBERT J. GLENN

3. The mailing address for future correspondence is:

P.O. BOX 838 GLENNS FERRY, IDAHO 83623

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>ROBERT J. GLENN</u>	<u>P.O. BOX 838 GLENNS FERRY, ID 83623</u>
<u>LAWRENCE M. GLENN</u>	<u>P.O. BOX 568 MONT ALTO, PA 17237</u>
<u>ANN L. COWDEN</u>	<u>415 E. CARBONATE ST. HAILEY, ID 83333</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: Robert J. Glenn

Typed Name: ROBERT J. GLENN

Capacity: INITIAL MANAGER

Signature:

Typed Name:

Capacity:

Secretary of State use only

9:00pm 1/11/05 LL C Form 1/1/05 for organization.pdf Revised 07/2002

IDAHO SECRETARY OF STATE
01/11/2005 05:00
CK: 1487 CT: 185115 BH: 786606
1 @ 100.00 = 100.00 ORGAN LLC # 2

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