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\$25 filing fee:

Receipt #: EU 32938

Date: 5/29/07

STATE OF IDAHO
DEPARTMENT OF WATER RESOURCES

ASSIGNMENT OF PERMIT

To change the ownership of a Permit

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JUN - 1 2007

DEPARTMENT OF
WATER RESOURCES

I, Wilderness Development Group, LLC, hereby assign to WDG Shadow Ridge, LLC

Of, P.O. Box 51298, Idaho Falls, ID 83405 (208) 351-6109
(Full Address) (Phone Number)

All my right, title, and interest in and to Permit No. 21-13048 to appropriate the public waters of the State of Idaho.

OR (for partial assignments)

The following described portion of my right, title, and interest in and to for Permit No.
 _____ to appropriate the public waters of the State of Idaho. (Describe portion of the Permit assigned, listing the number of acres in each 40-acre subdivision, point of diversion location, and amount of the water in cubic feet per second.)

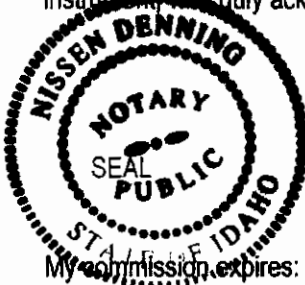
Made this 24th day of May, 2007.

VICK DEVELOPMENT, INC., a Member

Mike Vickers, President Permit Holder(s)

State of Idaho)
) ss
County of Bonneville)

On this 24th day of May, 2007, personally appeared before me the signer(s) of the above instrument who duly acknowledged to me that he (she) (they) executed the same.



Notary Public residing at Idaho Falls, Idaho

My commission expires:

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MAY 23 2007

Department of Water Resources
Eastern Region



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

1. The name of the limited liability company is:

Wilderness Development Group, LLC

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

1000 Riverwalk Drive, Suite 200, Idaho Falls, Idaho 83402

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

Charles A. Homer, Esq.

3. The mailing address for future correspondence is:

PO Box 51298, Idaho Falls, Idaho 83405

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>BV Developments, LLC</u>	<u>PO Box 51298</u>
	<u>Idaho Falls, Idaho 83405</u>
<u>Vick Development, Inc.</u>	<u>1985 East 183 North</u>
	<u>Rexburg, Idaho 83440</u>

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

Signature:

Typed Name: Thel W. Casper, Esq.

Capacity: Organizer

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

Idaho Forms LLC Forms/Articles of Organization.pdf
Revised 07-2002

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MAY 19 2007

Department of Water Resources
Eastern Region

IDAHO SECRETARY OF STATE
06/08/2005 05:00
CK: 31141 CT: 2367 BH: 814857
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