



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

08 FEB 11 PH 3:13

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Alluvion LLC

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

905 W. Lake St. McCall ID 83638

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

Benjamin Owens

3. The mailing address for future correspondence is:

PO Box 1215 McCall ID 83638

4. The limited liability company will be:

Manager-managed ☐ or Member-managed ☒ (please check the appropriate box)

5. If manager-managed, list the name(s) and address(es) of at least one initial manager.  
If member-managed, list the name(s) and address(es) of at least one initial member.

**Name**

**Address**

Benjamin Owens

PO Box 1215 McCall ID 83638

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

Signature: 

Typed Name: Benjamin Owens

Capacity: Managing Member

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/11/2008 05:00  
CK: 1456477 CT: 172099 BH: 1099130  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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Revised 05/2007

Web Form

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