



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2003 FEB 10 AM 9:19
SECRETARY OF STATE
STATE OF IDAHO

Personal Adventures Consulting, LLC

1. The name of the limited liability company is: _____
2. The address of the initial registered office is: 114 Old Oregon Rd., P O Box 464
(not a PO Box)
Soda Springs, Idaho 83276 and the name of the initial registered agent at that address is: Lynette Tucker

Signature of registered agent: _____

Lynette M Tucker

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) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

Name:

Address:

Lynette Tucker

114 Old Oregon Rd, Soda Springs, ID 83276

Michael Tucker

114 Old Oregon Rd, Soda Springs, ID 83276

5. Signature of at least one person listed in #4 above:

Lynette M Tucker

Secretary of State use only

9 Corporations LLC 1465 Revised 6/97

IDAHO SECRETARY OF STATE
02/10/2003 05:00
CK: 1357 CT: 71425 BH: 661856
1 @ 100.00 = 100.00 ORGAN LLC # 2
W 22678