

**ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY**

JUN 18 11 10 AM '97
SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)



1. The name of the limited liability company is: TRAINING UNLIMITED TOURS LTD Co.

2. The address of the initial registered office is: 3187 WHITMAN
BOISE, ID 83705 (not a PO Box)
and the name of the initial registered agent at that address is: TIM J. COWLES

Signature of registered agent: Tim J. Cowles

3. The latest date certain on which the limited liability company will dissolve: 6/18/2035

4. Is management of the limited liability company vested in a manager or managers?
☒ Yes ☐ No (check appropriate box)

5. 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:
<u>TIM J. COWLES</u>	<u>3187 WHITMAN BOISE 05</u>
<u>JAN COWLES</u>	<u>3187 WHITMAN BOISE 05</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

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

Tim J. Cowles

g:\corpforms\llc1.pm6 Revised 8/96

Secretary of State use only
IDAHO SECRETARY OF STATE
DATE 06/18/1997
0900 103330 2
CX #: 4800 CUST#: 83116
ORGAN LLC 1@ 100.00= 100.00
CORP SUR 1@ 20.00= 20.00

X W 4235