



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2007 JAN 18 AM 9:24

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

OT LLC

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

506 W. Alder St, Sandpoint, ID 83864

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

Casey Krivor

3. The mailing address for future correspondence is:

P.O. Box 905, Sandpoint, ID 83864

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

Casey Krivor

P.O. Box 905 Sandpoint, ID 83864

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

Signature: *Casey Krivor*

Typed Name: Casey Krivor

Capacity: Manager

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE
01/18/2007 05:00
CK: 10720 CT: 69881 BH: 1026991
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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