



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2004 MAY 17 PM 3:01

STATE OF IDAHO

1. The name of the limited liability company is:

Highbrows, LLC

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

4082 W. 49<sup>th</sup> SO Idaho Falls ID 83402

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

John Steiffing

3. The mailing address for future correspondence is:

4082 W. 49<sup>th</sup> SO. Idaho Falls, ID 83402

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

John Steiffing

4082 W. 49<sup>th</sup> SO. Idaho Falls, ID 83402

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

Signature: John Steiffing

Typed Name: John Steiffing

Capacity: owner

Signature \_\_\_\_\_

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/17/2004 05:00  
CK: 667 CT: 178829 IM: 745612  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 CORP SUR # 3

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