



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2007 MAY 25 PM 12:31

1. The name of the limited liability company is:

ROWEAS LLC

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

6788 South Main ST Bonners Ferry Id 83805

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

William D Powers

3. The mailing address for future correspondence is:

6788 South Main ST Bonners Ferry Id 83805

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

William Powers

6788 Main ST
Bonners Ferry Id 83805

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

Signature: William D Powers

Typed Name: William D Powers

Capacity: OWNER

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
05/25/2007 05:00
CK: 102 CT: 213774 BH: 1056028
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 CORP SUR # 3