



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2006 JUL 28 AM 9:07

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

FLOYD INSURANCE AGENCY, LLC

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

3380 E. 17TH ST. IDAHO FALLS, ID 83406

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

TYSON FLOYD

3. The mailing address for future correspondence is:

329 S WOODRUFF IDAHO FALLS, ID 83401

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

TYSON FLOYD

3380 E. 17TH ST. IDAHO FALLS, ID 83406

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

Signature: TS Floyd

Typed Name: TYSON FLOYD

Capacity: MANAGER

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

g:\corpforms\LLC forms\articlesoforganization.pdf
Revised 07/2002

IDAHO SECRETARY OF STATE
07/28/2006 05:00
CK: 1521 CT: 171497 BH: 967284
1 @ 100.00 = 100.00 ORGAN LLC # 2

Web Form

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