

FILED/EFFECTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

00 JUL 31 AM 9:26
STATE OF IDAHO

1. The name of the limited liability company is: IS, LLC
2. The address of the initial registered office is: 945 Maplewood Dr.
Idaho Falls, ID 83401
- and the name of the initial registered agent at that address is: Terry Jacobs
- Signature of registered agent: [Signature]

3. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒. (please check the appropriate box)

4. 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 members, list the name(s) and address(es) of at least one initial member.

NameAddressJason Bowman945 Maplewood Dr.Idaho Falls, ID 83401Terry Jacobs828 Calliope LnIdaho Falls, ID 83402

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

[Signature] JASON BOWMAN

[Signature] TERRY JACOBS

IDAHO SECRETARY OF STATE

08/01/2000 09:00
CK: 17621 CT: 15952 BH: 337763

1 @ 20.00 = 20.00 CORP SUR # 2

IDAHO SECRETARY OF STATE

08/01/2000 09:00
CK: 3038 CT: 134200 BH: 337762

1 @ 100.00 = 100.00 ORGAN LLC # 2

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