

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on other page)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98 NOV -9 AM 9:08

1. The assumed business name which the undersigned uses in the transaction of business is:

McCurdy Company, A Partnership

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Byron McCurdy

1904 Candleridge Drive, Twin Falls, Idaho 83301

Terry McCurdy

692 Mountain View Drive, Twin Falls, Idaho 83301

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐
☐
☐

Retail Trade
Wholesale Trade
Services

☐
☐
☐

Manufacturing
Agriculture
Construction

☐
☒
☐

Transportation and Public Utilities
Finance, Insurance and Real Estate
Mining

4. The name and address to which future Correspondence should be addressed:

McCurdy Company, A Partnership

212 Second Avenue West

Twin Falls, Idaho 83301

Phone number (optional): _____

5. Name and address for this acknowledgement copy is (if other than #4 above):

FIRST SECURITY BANK N.A.
COMMERCIAL LOAN DOCUMENTATION CENTER
P.O. BOX 8203
BOISE, IDAHO 83707

Submit Certificate of
Assumed Business

Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID, 83720-0080
(208) 334-2301

Signature:

Printed Name: Byron McCurdy

Capacity: Partner

Signature:

Printed Name: Terry McCurdy

Capacity: Partner

(see instruction #7 on other sheet)

Secretary of State Use Only

IDAHO SECRETARY OF STATE

11/09/1998 09:00
CK: 368384158 CT: 66269 BH: 159845

1 @ 20.00 = 20.00 ASSUM NAME # 2

019852

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

To the Secretary of State of Idaho,
700 West Jefferson Room 203
P.O. Box 83720, Boise, Idaho 83720-0080

02 JUL -3 AM 9: 55

STATE OF IDAHO

1. The name of the limited liability company is: Thom Lot 1, LLC

2. The address of the initial registered office is 9851 W. Harness Dr., Boise, ID 83709
(not a PO Box)

_____ and
the name of the initial registered agent at that address is Jess J. Thom.

Signature of registered agent: _____

3. The latest date certain on which the professional limited liability company will dissolve is:
12/31/2050.

4. Is management of the limited liability company vested in a manager or managers?

☐ Yes ☒ NO (check appropriate box)

5. If management is vested in one or more managers, list the names and addresses of at least one initial manager. If management is vested in the members, list the names and addresses of at least one member.

Name:

Address:

Jess J. Thom

9851 W. Harness Dr., Boise, ID 83709

6. Signature(s) of at least one person listed in #5 above:

Secretary of State use only

IDAHO SECRETARY OF STATE
07/03/2002 05:00
CK: 32638 CT: 10153 DH: 475349
1 0 100.00 = 100.00 ORGAN LLC # 2