



08 MAY -2 AM 8:36

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

McKnight Enterprise, LLC

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

145 N. Hwy 75, Shoshone, ID 83352

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

Sparr McKnight

- 3. The mailing address for future correspondence is:**

145 N. Hwy 75, Shoshone, ID 83352

- 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) or 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

Sparr McKnight

145 N. Hwy 75, Shoshone, ID 83352

Wendi McKnight

145 N. Hwy 75, Shoshone, ID 83352

Tim McKnight

145 N. Hwy 75, Shoshone, ID 83352

Debbie McKnight

145 N. Hwy 75, Shoshone, ID 83352

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

Signature: 

Typed Name: Chris Mershon

Capacity: Organizer

Signature _____

Typed Name: _____

Capacity:

Secretary of State use only

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Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE
05/02/2008 05:00
CK: 9122 CT: 181978 DH: 1113119
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