



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2006 JUL 27 AM 8:48

1. The name of the limited liability company is:

ANDERSON T TOOL REPAIR LLC

SECRETARY OF STATE
STATE OF IDAHO

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

26739 GAIL LANE MIDDLETON ID 83644

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

MICHAEL T ANDERSON

3. The mailing address for future correspondence is:

PO BOX 935 MIDDLETON, ID 83644

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

MICHAEL T. ANDERSON

26739 GAIL LN, MIDDLETON, ID 83644

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

Signature: *Michael T. Anderson*

Typed Name: MICHAEL T ANDERSON

Capacity: MANAGER

Signature _____

Typed Name: _____

Capacity: _____

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE *en*
07/27/2006 05:00
CK: 4261 CT: 202786 BH: 967810
1 @ 100.00 = 100.00 ORGAN LLC # 2

Web Form

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