



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED/EFFECTIVE

2001-8 APR 8:24

STATE OF IDAHO

1. The name of the limited liability company is:

EASTSIDE FLORIST, LLC

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

5617 HIGHWAY 52, NEW PLYMOUTH, IDAHO 83655

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

CORALEE NELSON

3. The mailing address for future correspondence is:

5617 HIGHWAY 52, NEW PLYMOUTH, IDAHO 83655

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
<u>CORALEE NELSON</u>	<u>5617 HWY 52, NEW PLYMOUTH, ID 83655</u>
<u>TROY NELSON</u>	<u>5617 HWY 52, NEW PLYMOUTH, ID 83655</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: *L.D. Wees*

Typed Name: L.D. WEES

Capacity: ORIGINATOR

Signature:

Typed Name:

Capacity:

Secretary of State use only

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IDAHO SECRETARY OF STATE
01/08/2003 05:00
CK: 3000 CT: 145009 BH: 655507
1 @ 100.00 = 100.00 ORGAN LLC # 2

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