



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED-EFFECTIVE

2004 OCT 22 AM 9:10

STATE OF IDAHO

1. The name of the limited liability company is:

T.L.C., L.L.C.

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

4597 S. GREENFIELD LANE, COEUR D'ALENE, ID 83814

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

TIMOTHY J. LENARZ

3. The mailing address for future correspondence is:

4597 S. GREENFIELD LANE, COEUR D'ALENE, ID 83814

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
<u>TIMOTHY J. LENARZ</u>	<u>4597 S. GREENFIELD, CDA ID 83814</u>
<u>SHERRY J. LENARZ</u>	<u>4597 S. GREENFIELD, CDA ID 83814</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

Signature: *Timothy Lenarz*
 Typed Name: TIMOTHY LENARZ
 Capacity: MANAGING MEMBER

Signature: _____
 Typed Name: _____
 Capacity: _____

Secretary of State use only

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 Revised 07/2002

IDAHO SECRETARY OF STATE
 10/22/2004 05:00
 CK: 12210 CT: 66034 BH: 772564
 1 @ 100.00 = 100.00 ORGAN LLC # 2

Web Form

W34093