



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2008 MAY 23 AM 10:39

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Flatline, LLC

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

612 3rd Ave West Twin Falls, Id 83301

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

Steve C. Brown

3. The mailing address for future correspondence is:

P. O Box 5783 Twin Falls, Id 83301

4. The limited liability company will be:

Manager-managed ☐ or Member-managed ☒ (please check the appropriate box)

5. If manager-managed, list the name(s) and address(es) of at least one initial manager.
If member-managed, list the name(s) and address(es) of at least one initial member.

Name

Address

Steve C. Brown

612 3rd Ave West Twin Falls,

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

Signature: [Signature]

Typed Name: Steve C. Brown

Capacity: member

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

g:\compliance\LLC forms\articlesoforganization.pmd
Revised: 05/2007

IDAHO SECRETARY OF STATE
05/23/2008 05:00
CK: 114892 CT: 172899 BH: 1116583
1 @ 100.00 = 100.00 ORGAN LLC # 2

W74585