



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

1. The name of the limited liability company is:

Weires Consulting, LLC

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

1032 N. Spirea Avenue/Boise, ID/83713

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

Patricia Weires

3. The mailing address for future correspondence is:

1032 N. Spirea Avenue/Boise, ID/83713

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

Patricia Weires

1032 N. Spirea Avenue/Boise, ID/83713

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

Signature: Patricia Weires

Typed Name: Patricia Weires

Capacity: Manager

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

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Revised 05/2007

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05/06/2008 05:00
CK: 2349 CT: 225700 BH: 1113671
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Web Form

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