

## **ARTICLES OF ORGANIZATION** LIMITED LIABILITY COMPANY

FRE FRE CTIVE

(Instructions on back of application)

1.	The name of the limited liability comp	pany is:	SECRETARY OF STATE STATE OF IDAHO
2.	The street address of the initial registered office is: 414 S. Jefferson Street, Moscow ID 83843		
	and the name of the initial registered agent at the above address is:  James L. Westberg		
3.	The mailing address for future correspondence is: PO Box 9003, Moscow ID 83843		
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	Addr	ess
	James L. Westberg		
	Mary F. Westberg		
			10.00
6. Signature of at least one person responsible for forming the limited liability company:			
			ary of State use only
	Capacity: Member		
_	Maria akana	22 22 23 24 25 26 26 26 26 26 26 26 26 26 26 26 26 26	
	Signature	Pormst LC formst Revised 07/2002	IDAHO SECRETARY OF STATE
	yped Name: Capacity:	orpitormet LC terminatracioniga nicration p65 Revised 07/2002	14/20/2006 05:00 CK: 7679 CT: 2039 BH: 950337

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