

# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)



1. The name of the limited liability company is: NORTHSTAR PLUS, LLC
2. The address of the initial registered office is: 340 FALLS AVENUE TWIN FALLS,  
(not a PO Box)  
IDAHO 83301 and the name of the initial registered agent at that address is: SPENCER G. WILLIAMS  
Signature of registered agent: *Spencer G. Williams*
3. The latest date certain on which the limited liability company will dissolve: 1/2/2027
4. Is management of the limited liability company vested in a manager or managers?  
☒ Yes ☐ No (check appropriate box)
5. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.  

<u>Name:</u>	<u>Address:</u>
<u>SPENCER G. WILLIAMS</u>	<u>340 FALLS AVENUE TWIN FALLS, ID</u> <u>83301</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
6. Signature of at least one person listed in #5 above:  
*Spencer G. Williams*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IDAHO SECRETARY OF STATE  
DATE 04/08/1997  
0900 80708 2  
Secretary of State  
EX #1 1093 COST# 79490  
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