TO FINE CTIVE



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on bac	ck of application)	216 MAR - 6 PH 1:2:
1. The n	ame of the limited liability cor	mpany is:	
Lore	nz Construction LLC		SIME OF HELD
2. The s	treet address of the initial reg	istered office is:	
458	Crestline Circle Dr.		
and th	e name of the initial registere	ed agent at the above add	lress is:
Rob	ert M. Lorenz		
3. The m	nailing address for future corre	espondence is:	
458	Crestline Circle Dr. Lewistor	n , Idaho 83501	
4. Mana	gement of the limited liability o	company will be vested in	·
Mana	ger(s)	(please check the appropria	rte box)
	ss(es) of at least one initial ma per(s), list the name(s) and ad Name		
Robe	ert M. Lorenz	458 Crestline Circle I	Dr. Lewiston , Id. 83501
Robe	ert M. Lorenz	458 Crestline Circle	Dr. Lewiston , Id. 83501
Robe	ert M. Lorenz	458 Crestline Circle	Dr. Lewiston , Id. 83501
Robe	ert M. Lorenz	458 Crestline Circle	Or. Lewiston , Id. 83501
Robe	ert M. Lorenz	458 Crestline Circle I	Dr. Lewiston , Id. 83501
	ure of at least one person res		mited liability company:
6. Signatu	ure of at least one person res	ponsible for forming the li	
5. Signatu Signatu Typed N	ure of at least one person res re: いっしょ 	ponsible for forming the li	mited liability company:
6. Signatu Signatu Typed N Capacit	ure of at least one person restre: \(\forall \) obot \(\forall \). \(\forall \) Value: Robert M. Lorenz Ey: Owner	ponsible for forming the li	mited liability company: Secretary of State use only
6. Signate Signate Typed N Capacite	ure of at least one person resure: \(\frac{1}{2} \oldsymbol{\text{old}} \tag{4}. \) Vame: \(\frac{1}{2} \oldsymbol{\text{old}} \tag{4}. \) Name: \(\frac{1}{2} \oldsymbol{\text{old}} \tag{4}. \) Name: \(\frac{1}{2} \oldsymbol{\text{old}} \tag{4}. \) Name: \(\frac{1}{2} \oldsymbol{\text{old}} \tag{4}. \)	ponsible for forming the l	mited liability company:

CK: 2713 CT: 197735 BH: 941545