

# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)



FILED

99 OCT - 7 AM 8:44  
CLERK OF STATE  
IDAHO

1. The name of the limited liability company is: D P P SERVICES, L.L.C.
2. The address of the initial registered office is: 660 Nina, Rexburg, ID 83440  
(not a PO Box)
- \_\_\_\_\_ and the name of the initial registered agent at that address is: DAVID E. PARKINSON
- Signature of registered agent: *David E. Parkinson*

3. The latest date certain on which the limited liability company will dissolve: 12/31/2039
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.

Name:

Address:

DAVID E. PARKINSON

660 Nina, Rexburg, ID 83440

PENNY M. PARKINSON

660 Nina, Rexburg, ID 83440

6. Signature of at least one person listed in #5 above:

*David E. Parkinson*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IDAHO SECRETARY OF STATE  
Secretary of State use only

10/07/1999 09:00  
CK: 2352 CT: 121433 BH: 256231

1 @ 100.00 = 100.00 ORGAN LLC # 2

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