



ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

FEB 11 AM 11:32

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

JAXON CONSTRUCTION, LLC

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

511 E GROVE PARMA ID 83660

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

CHRIS JAXON

3. The mailing address for future correspondence is:

PO BOX 938 PARMA ID 83660

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	Address
<u>CHRIS JAXON</u>	<u>PO BOX 938 PARMA ID 83660</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

Signature: *Chris Jaxon*

Typed Name: CHRIS JAXON

Capacity: _____

Signature: _____

Typed Name: _____

Capacity: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/11/2005 05:00
CK: CASH CT: 166838 BH: 792677
1 @ 100.00 = 100.00 ORGAN LLC # 2

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