

## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

03 OCT 21 PM 12: 41

	•	, ,		
1.	The name of the limited liability compa		RETARY OF STATE STATE OF IDAHO	
	Optimum Underlayments, LLC			
2.	The street address of the initial registered office is:  4815 S. Fern Nampa ID 83686			
	and the name of the initial registered agent at the above address is:			
	Troy J. Paulin			
3.	The mailing address for future correspondence is:  4815 S. Fern Nampa ID 83686			
4.	Management of the limited liability company will be vested in:			
••	Manager(s) K or Member(s) (please check the appropriate box)			
	(please cleck the appropriate box)			
5.	If management is to be vested in one or more manager(s), list the name(s) and address(es) or 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.			
	<u>Name</u>	Addres	<u>58</u>	
	Tray Paulin	4815 5 Fern Namp	n. TD BUGGIA	
			721 /	
			, - <del></del>	
	7.7			
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	Signature of at least one person respo	nsible for forming the limited li	ability company:	
	Signature:	Secreta	ry of State use only	
	Typed Name: Troy J. Paulin Capacity: Owner/President	L CONTRACTOR DE LA CONT		
		19 16/	DAHO SECRETARY OF STATE 21/2003 05:00	
;	Signature	\$ 8 CK: 16 190	802 CT: 171810 BH: 787631 8.80 = 180.88 ORGAN LLC # 8	
•	Typed Name:	Per 9 1 196	J26530	
1	Capacity:	<b>*</b> *	0 4 6 2 3 0	