

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

194 SEP 23 FH 3: 43

1. The name of the limited liability company is:

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

(Instructions on back	of application)	SECRET FOR STATI STATE OF IDA HO
The name of the limited liability comp	pany is:	STATE OF IDAHO
Leighton Digital Photography, LLC		
The street address of the initial regist	ered office is:	
1931 Tracy Ct. Meridian, ID 83642		
and the name of the initial registered	agent at the above a	ddress is:
Jeffrey Leighton Dodge		
The mailing address for future corresp	pondence is:	
1931 Tracy Ct. Meridian, ID 83642		La ven
Management of the limited liability co	mpany will be vested	in:
Manager(s) ✓ or Member(s)	_	
If management is to be vested in one address(es) of at least one initial man	or more manager(s), nager. If managemen	t is to be vested in the
If management is to be vested in one address(es) of at least one initial mar member(s), list the name(s) and address	or more manager(s), nager. If managemen	t is to be vested in the
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If management is to be vested in one address(es) of at least one initial man member(s), list the name(s) and address Name Jeffrey L. Dodge Signature of at least one person responses Signature:	or more manager(s), nager. If managemen ress(es) of at least on 1931 Tracy Ct. Me	t is to be vested in the le initial member. Address eridian, ID 83642
If management is to be vested in one address(es) of at least one initial man member(s), list the name(s) and address Name Jeffrey L. Dodge Signature of at least one person responses	or more manager(s), nager. If managemen ress(es) of at least on 1931 Tracy Ct. Me	t is to be vested in the lie initial member. Address eridian, ID 83642

	Jeffrey Leighton Dodge	
	The mailing address for future corres	spondence is:
	1931 Tracy Ct. Meridian, ID 83642	2
	Management of the limited liability co	ompany will be vested in:
	Manager(s) ✓ or Member(s) ☐	(please check the appropriate box)
•	address(es) of at least one initial ma	e or more manager(s), list the name(s) and anager. If management is to be vested in the dress(es) of at least one initial member.
	Name	Address
	Jeffrey L. Dodge	1931 Tracy Ct. Meridian, ID 83642
6 .	Signature of at least one person res	ponsible for forming the limited liability company:
6 .	Signature:	Secretory of State upp only
S .	Signature: Jeffrey L. Dodge	Secretory of State upp only
5.	Signature:	Secretory of State upp only
5.	Signatu <u>re:</u> Typed Name: <u>Jeffrey L. Dodge</u> Capacity: <u>Manager/Owner</u>	Secretory of State upp only
5.	Signature: Typed Name: Jeffrey L. Dodge Capacity: Manager/Owner Signature	Secretory of State upp only
5.	Signatu <u>re:</u> Typed Name: <u>Jeffrey L. Dodge</u> Capacity: <u>Manager/Owner</u>	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STAT 29/23/2004 05: CK: 9233442462CLH CT: 172099 B 1 0 198.98 = 198.90 ORGAN