

## **ARTICLES OF ORGANIZATION** I IMITED LIABILITY COMPANY 05 DEC -6 DE

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T H	(Instructions on back	of application) SECrements
1.	The name of the limited liability comp	of application)  SECK STATE OF IDAHO  STATE
	ECKSAW, LLC	
2.	The street address of the initial registe	ered office is:
	6152 West Half Moon Lane, Eagle, Idaho, 83616	
	and the name of the initial registered agent at the above address is:	
	Timothy W. Eck	
3.	The mailing address for future corresp	pondence is:
	6152 West Half Moon Lane, Eagle, Idaho, 83616	
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.	
	member(s), list the name(s) and addi	
	Name	Address
	Timothy W. Eck	6152 W. Half Moon Lane, Eagle, Idaho, 83616
6.	Signature of at least one person resp	consible for forming the limited liability company:
	Signature:	Secretary of State use only
	Typed Name: Scott Tschirgi	instruction (
	Capacity: Organizer	
	Signature	IDAHO SECRETARY OF STATE 12/06/2005 05:  CK: 49859 CT: 67242 BH: 9  1 0 100.00 = 100.00 ORGAN
	Typed Name:	IDAHO SECRETARY OF STAT  12/06/2005 05: CK: 49859 CT: 67242 BH: 9  1 0 100.00 = 100.00 ORGAN
	Capacity:	ga

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