



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2004 AUG 18 A 8:54  
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FILED EFFECTIVE

1. The name of the limited liability company is:

John C. Anderson, L.L.C.

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

1801 Highland Avenue East, Twin Falls, ID 83301

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

John C. Anderson

3. The mailing address for future correspondence is:

P.O. Box 469, Twin Falls, ID 83303-0469

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>John C. Anderson</u>	<u>P.O. Box 469, Twin Falls, ID 83303-0469</u>
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<u> </u>	<u> </u>

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

Signature: *John C. Anderson*

Typed Name: John C. Anderson

Capacity: Member

Signature:  

Typed Name:  

Capacity:  

Secretary of State use only

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08/18/2004 05:00  
CK: 12350 CT: 153501 DH: 761492  
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