	ARTICLES OF ORC	-	FILED EFTER
	(Instructions on back of	fapplication)	05 DEC 29 PH 1:42
1.	The name of the limited liability compa An Outlet 4U Electric, LLC	ny is:	SECRETARY OF STATE STATE OF IDAHO
2.	The street address of the initial register 3918 Rose Hill Street, Boise, Idaho 8		
	and the name of the initial registered ag Sandra Kay Jones		Iress is:
3.	The mailing address for future correspo 3918 Rose Hill Street, Boise, Idaho 8		
4.	Management of the limited liability comp	pany will be vested in	
	Manager(s) 🖌 or Member(s) 🗌	(please check the appropria	te box)
5. I		more manager(s), lis	t the name(s) and
5. I	Manager(s) 🗹 or Member(s) 🔲 If management is to be vested in one or address(es) of at least one initial manage	more manager(s), lis	t the name(s) and
5. I	Manager(s)   or Member(s)  If management is to be vested in one or  address(es) of at least one initial managemember(s), list the name(s) and addres Name	more manager(s), lis ger. If management is s(es) of at least one i	et the name(s) and s to be vested in the nitial member.
5. I	Manager(s)   or Member(s)  If management is to be vested in one or  address(es) of at least one initial managemember(s), list the name(s) and addres Name	more manager(s), lis ger. If management is s(es) of at least one i	et the name(s) and s to be vested in the nitial member. Address
5. I	Manager(s)   or Member(s)  If management is to be vested in one or  address(es) of at least one initial managemember(s), list the name(s) and addres Name	more manager(s), lis ger. If management is s(es) of at least one i	et the name(s) and s to be vested in the nitial member. Address
5.   7 7	Manager(s) 🔽 or Member(s) 🔲 If management is to be vested in one or address(es) of at least one initial managemember(s), list the name(s) and address Name Sandra Kay Jones 3 Gignature of at Jeast one person responses	more manager(s), lis ger. If management is s(es) of at least one i	et the name(s) and s to be vested in the nitial member. Address t, Boise, Idaho 83705
5.   7 6. S Si Ty	Manager(s)   or Member(s)  If management is to be vested in one or  address(es) of at least one initial managemember(s), list the name(s) and addres Name	more manager(s), lis ger. If management is s(es) of at least one i 3918 Rose Hill Stree	t the name(s) and to be vested in the nitial member. Address t, Boise, Idaho 83705
5. I a r f Si Si Si	Manager(s) vor Member(s)	more manager(s), lis ger. If management is ss(es) of at least one i 3918 Rose Hill Stree	at the name(s) and s to be vested in the nitial member. Address t, Boise, Idaho 83705