

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	LIMITED LIABILI (Instructions on back	k of application)	
1.	The name of the limited liability com		
2.	The street address of the initial registered office is: 6220 E LAMB ROAD, HARRISON ID 83833		
	and the name of the initial registered TOM LAMB	d agent at the above address is:	
3.	The mailing address for future correspondence is: PO BOX 275 HARRISON, ID 83833		
4.	Management of the limited liability company will be vested in:		
	Manager(s) ☐ or Member(s) ✓	-	
5.	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	
	TOM LAMB	PO BOX 275, HARRISON, ID 83833	
	JOSHUA LAMB	4263 E LAMB ROAD, HARRISON, ID 83833	
	GABE LAMB	PO BOX 173, HARRISON, ID 83833	
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	Signature of at least one person responsible for the signature:	onsible for forming the limited liability company:	
٦	yped Name: TOM LAMB Capacity: MEMBER	Secretary of State use only Secretary of State use only	
	Signature JOSHUA-LAMB	IDAHO SECRETARY OF STATE DESCRIPTION	
	yped Name: JOSHUA LAMB Capacity: MEMBER	CK: 2417 CT: 188599 BH: 889281 1 2 100.00 = 100.08 CRGAN LLC #	

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