



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED**

(Instructions on back of application)

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 SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is: Manx LLC
2. The address of the initial registered office is: 233 Second Street North, Twin Falls, ID  
(not a PO Box)  
83301
- and the name of the initial registered agent at that address is: Douglas Vollmer
- Signature of registered agent: *Douglas Vollmer*

3. Is management of the limited liability company vested in a manager or managers?

☒ Yes ☐ No (check appropriate box)

4. If management is vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is vested in the members, list the name(s) and address(es) of at least one initial member.

Name:
Address:
Douglas Vollmer
P. O. Box 566, Twin Falls, ID 83303-0566
DeAnna Vollmer
P. O. Box 566, Twin Falls, ID 83303-0566

5. Signature of at least one person listed in #4 above:

*Douglas Vollmer*

*DeAnna Vollmer*

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01/24/2000 09:00

CK: 2901 CT: 93412 BH: 203529

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