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## ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

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OF STATE (Instructions on back of application) 1. The name of the limited liability company is: **GOYEN ASSOCIATE LLC** 2. The street address of the initial registered office is: 4714 EAST MOEN ROAD, HAYDEN LAKE, ID 83835-9044 and the name of the initial registered agent at the above address is: WILLIAM A GOYEN 3. The mailing address for future correspondence is: 4714 EAST MOEN ROAD, HAYDEN LAKE, ID 83835-9044 4. The limited liability company will be: Manager-managed ☐ or Member-managed ✓ (please check the appropriate box) 5. If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member. Name **Address** WILLIAM A GOYEN 4714 EAST MOEN ROAD, HAYDEN LK 83835 6. Signature of at least one person responsible for forming the limited liability company: Secretary of State use only Typed Name: WILLIAM A GOYEN Capacity: MEMBER Signature\_\_\_\_\_ Typed Name:

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