

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2003 FEB 12 AM 9:00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is: **LAWRASON ENTERPRISES, LLC**
2. The address of the initial registered office is: **631 Concordia Circle, Twin Falls, ID 83301**
(not a P.O. Box)
and the name of the initial registered agent at that address is: **Robert H. Lawrason.**
3. The mailing address for future correspondence: **631 Concordia Circle, Twin Falls, ID 83301**
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 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:

Robert H. Lawrason

**631 Concordia Circle
Twin Falls, ID 83301**

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

Signature 
ROBERT H. LAWRASON
Capacity: Member

IDAHO SECRETARY OF STATE
02/12/2003 05:00
CK: 30322 CT: 2053 BH: 662504
1 @ 100.00 = 100.00 ORGAN LLC # 2

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