



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2005 MAR 14 AM 9:52  
CLERK OF STATE OF IDAHO

1. The name of the limited liability company is:

TriPower Studios, LLC

2. The street address of the initial registered office is:

477 Shoup Avenue, Suite 109, Idaho Falls, ID 83402

and the name of the initial registered agent at the above address is:

Steven J Wright

3. The mailing address for future correspondence is:

PO Box 50578, Idaho Falls, ID 83405-0578

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 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
<u>Steven J Wright</u>	<u>PO Box 50578, Idaho Falls, ID 83405-0578</u>
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6. Signature of at least one person responsible for forming the limited liability company:

Signature: 

Typed Name: Steven J Wright

Capacity: Manager

Signature:  

Typed Name:  

Capacity:  

Secretary of State use only

9 CorpForms LLC forms for organization.pdf  
Revised 07/2002

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