ARTICLES OF ORGANIZATION

Corporation Division
sos.oregon.gov/business

E-FILED
Oct 10, 2025
OREGON SECRETARY OF STATE

REGISTRY NUMBER

247776495

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

1. ENTITY NAME

NEXT BITE ENTERPRISES LLC

2. MAILING ADDRESS

655 GOODPASTURE IS RD
APT 31
EUGENE OR 97401 USA

3. PRINCIPAL PLACE OF BUSINESS

143 SW CENTURY DR STE 110
BEND OR 97702 USA

4. NAME & ADDRESS OF REGISTERED AGENT

EILEEN M LAURY

655 GOODPASTURE ISLAND RD APT 31
EUGENE OR 97401 USA

5. ORGANIZERS

EILEEN M LAURY

655 GOODPASTURE IS RD
APT 31
EUGENE OR 97401 USA

6. INDIVIDUALS WITH DIRECT KNOWLEDGE

EILEEN M LAURY

655 GOODPASTURE IS RD
APT 31
EUGENE OR 97401 USA

7. INITIAL MEMBERS/MANAGERS

MEMBER

EILEEN M LAURY

655 GOODPASTURE IS RD
APT 31
EUGENE OR 97401 USA

MEMBER

DANIEL C LAURY

655 GOODPASTURE IS RD
APT 31
EUGENE OR 97401 USA

8. DURATION

PERPETUAL

9. MANAGEMENT

This Limited Liability Company will be member-managed by one or more members

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, managers, members or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

EILEEN M LAURY

TITLE

ORGANIZER

DATE

10-09-2025