ARTICLES OF ORGANIZATION

Corporation Division
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E-FILED
Feb 01, 2019
OREGON SECRETARY OF STATE

REGISTRY NUMBER

152124096

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

1. ENTITY NAME

VIONE, LLC

2. MAILING ADDRESS

110 E BUTLER LN
ASHLAND OR 97520 USA

3. PRINCIPAL PLACE OF BUSINESS

110 E BUTLER LN
ASHLAND OR 97520 USA

4. NAME & ADDRESS OF REGISTERED AGENT

NANCY SOLANO

110 E BUTLER LN
ASHLAND OR 97520 USA

5. ORGANIZERS

NANCY SOLANO

110 E BUTLER LN
ASHLAND OR 97520 USA

6. INDIVIDUALS WITH DIRECT KNOWLEDGE

NANCY SOLANO

110 E BUTLER LN
ASHLAND OR 97520 USA

7. INITIAL MEMBERS/MANAGERS

MANAGER

NANCY SOLANO

110 E BUTLER LN
ASHLAND OR 97520 USA

8. DURATION

PERPETUAL

9. MANAGEMENT

This Limited Liability Company will be manager-managed by one or more managers

10. OPTIONAL PROVISIONS

The company elects to indemnify its members, managers, employees, agents for liability and related expenses under ORS 63.160 to 63.170.

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

NANCY SOLANO

TITLE

ORGANIZER

DATE SIGNED

01-31-2019