ARTICLES OF ORGANIZATION

Corporation Division
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E-FILED
Jun 23, 2021
OREGON SECRETARY OF STATE

REGISTRY NUMBER

183920991

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

1. ENTITY NAME

LATERAL.SYSTEMS LLC

2. MAILING ADDRESS

PO BOX 321
MCMINNVILLE OR 97128 USA

3. PRINCIPAL PLACE OF BUSINESS

ZIDELL YARDS
3121 S MOODY AVE
PORTLAND OR 97239 USA

4. NAME & ADDRESS OF REGISTERED AGENT

JENNIFER GAYLE WELLS

ZIDELL YARDS
3121 S MOODY AVE
PORTLAND OR 97239 USA

5. ORGANIZERS

JENNIFER GAYLE WELLS

1982 PARK FOREST AVE
LAKE OSWEGO OR 97034 USA

ED LISLE

1191 NW OAKMONT CT
MCMINNVILLE OR 97128 USA

6. INDIVIDUALS WITH DIRECT KNOWLEDGE

JENNIFER GAYLE WELLS

1982 PARK FOREST AVE
LAKE OSWEGO OR 97034 USA

7. INITIAL MEMBERS/MANAGERS

MEMBER

ED LISLE

1191 NW OAKMONT CT
MCMINNVILLE OR 97128 USA

MEMBER

JENNIFER GAYLE WELLS

1982 PARK FOREST AVE
LAKE OSWEGO OR 97034 USA

8. DURATION

PERPETUAL

9. MANAGEMENT

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

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

JENNIFER GAYLE WELLS

TITLE

ORGANIZER

DATE SIGNED

06-23-2021