ARTICLES OF ORGANIZATION

Corporation Division
www.filinginoregon.com

E-FILED
Nov 01, 2021
OREGON SECRETARY OF STATE

REGISTRY NUMBER

188808894

TYPE

DOMESTIC LIMITED LIABILITY COMPANY

1. ENTITY NAME

WHITE RABBIT LLC

2. MAILING ADDRESS

PO BOX 224
AURORA OR 97002 USA

3. PRINCIPAL PLACE OF BUSINESS

21368 HWY 99E NE
AURORA OR 97002 USA

4. NAME & ADDRESS OF REGISTERED AGENT

EMILY L ARREOLA

21368 HWY 99E NE
AURORA OR 97002 USA

5. ORGANIZERS

EMILY L ARREOLA

21368 HIGHWAY 99E NE
AURORA OR 97002 USA

6. INDIVIDUALS WITH DIRECT KNOWLEDGE

EMILY L ARREOLA

1435 GEORGE ST
WOODBURN OR 97071 USA

7. INITIAL MEMBERS/MANAGERS

MEMBER

OSCAR ZIRAHUEN ARREOLA

1435 GEORGE
WOODBURN OR 97071 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

EMILY ARREOLA

TITLE

AUTHORIZED AGENT

DATE

11-01-2021