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Articles of Organization - Limited Liability Company

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FilingInOregon.com (Phone: (503) 986-2200

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FEB 11 2010

OREGON SECRETARY OF STATE

REGISTRY NUMBER: 664598-93

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In accordance with Oregon Revised Statute 192.410-192.490, all information on this form is publicly available, including addresses. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1) NAME OF LIMITED LIABILITY COMPANY: (Must contain the words "Limited Liability Company" or the abbreviations "LLC" or "L.L.C.")

LTR, LLC

2) DURATION: (Please check one.)

- Latest date upon which the Limited Liability Company is to dissolve is
Duration shall be perpetual.

3) REGISTERED AGENT: (Individual or entity that will accept legal service for this business)

Leslie Yudin, CPA

4) REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS: (Must be an Oregon Street Address, which is identical to the registered agent's business office.)

4110 SE Hawthorne, #234
Portland, OR 97214

5) ADDRESS WHERE THE DIVISION MAY MAIL NOTICES:

17006 NW Rockyford Rd
Yamhill, OR 97148

6) NAME AND ADDRESS OF EACH PERSON WHO IS FORMING THIS BUSINESS: (ORGANIZER)

Thomas Ponce
17006 NW Rockyford Rd. Yamhill, OR 97148
Laurel Blaser
17006 NW Rockyford Rd. Yamhill, OR 97148

7) IF THIS LIMITED LIABILITY COMPANY IS NOT MEMBER MANAGED, CHECK ONE BOX BELOW.

- This limited liability company is managed by a single manager.
This limited liability company is managed by multiple manager(s).

8) IF RENDERING A LICENSED PROFESSIONAL SERVICE OR SERVICES, DESCRIBE THE SERVICE(S) BEING RENDERED:

9) OPTIONAL PROVISIONS: (Attach a separate sheet if necessary.)

(OPTIONAL) LIST MEMBERS AND/OR MANAGERS NAMES AND ADDRESSES

10) OWNERS: (MEMBERS) (Names and Street address)

Thomas Ponce
17006 NW Rockyford Rd. Yamhill, OR 97148
Laurel Blaser
17006 NW Rockyford Rd. Yamhill, OR 97148

11) MANAGERS: (MANAGERS) (Names and Street address)

Thomas Ponce
17006 NW Rockyford Rd. Yamhill, OR 97148
Laurel Blaser
17006 NW Rockyford Rd. Yamhill, OR 97148

12) EXECUTION/SIGNATURE OF EACH PERSON WHO IS FORMING THIS BUSINESS: (Organizer) (The title for each signer must be "Organizer.")

By my signature, I declare as an authorized authority, that 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.

Signature:

Handwritten signatures of Thomas Ponce and Laurel Blaser

Printed Name:

Thomas Ponce
Laurel Blaser

Title:

Organizer
Organizer
Organizer

CONTACT NAME: (To resolve questions with this filing.)

Leslie Yudin, CPA

PHONE NUMBER: (Include area code.)

(503) 287-6680

FEES

LTR, LLC



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