

B0846-9416 01/17/2024 3:27 PM Received by Office of the Idaho Secretary of State



RESTATEMENT OF CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$30.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

-FILED-

File #: 0005572220

Date Filed: 1/17/2024 3:27:00 PM

1a. The name of the limited liability company is:

NOT WITHOUT US LLC

2a. The date the certificate of organization was filed: 07/24/2017

The Certificate of Organization is restated to:

1. The name of the limited liability company is:

NOT WITHOUT US LLC

2. The complete street and mailing address of the principal office is:

1859 N LAKEWOOD DRIVE SUITE 301, COEUR D ALENE ID 83814

(Street Address)

(Mailing Address, if different)

3. Registered agent name and address:

JAMIE DUMAN

(Name)

8245 N CORNERSTONE DRIVE, HAYDEN ID 83835

(Address)

Registered agent signature:

Jamie Duman

(New registered agent must sign here)

4. Mailing address for future correspondence:

8245 N CORNERSTONE DRIVE, HAYDEN ID 83835

(Mailing Address)

5. The name and address of at least one manager or member:

(Name)

(Address)

AARON GABRIEL

(Name)

1859 N LAKEWOOD DRIVE SUITE 301, COEUR D ALENE ID 83814

(Address)

(Name)

(Address)

6. Signature of a manager, member, or an authorized agent.

Printed Name: JAMIE DUMAN, Authorized Agent

Signature: *Jamie Duman*

Printed Name: Jamie Duman

Signature: _____

Secretary of State use only