



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed)

For Office Use Only

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File #: 0006163632

Date Filed: 3/4/2025 11:34:00 AM

1. The name of the limited liability company is:

Alpha Capital Advisors, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations "LLC," "LLC," or "LC.")

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

8677 W Mirror Pond Dr, Boise ID 83714

(Street and City)

(Mailing Address)

3. The name and complete street address of the registered agent:

James Andrew Endrizzi 8677 W Mirror Pond Dr, Boise ID 83714

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

James Andrew Endrizzi 8677 W Mirror Pond Dr, Boise ID 83714

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

8677 W Mirror Pond Dr, Boise ID 83714

(Mailing Address)

Signature of organizer(s).

Printed Name: **James Andrew Endrizzi**

Signature:

Printed Name: _____

Signature: _____

Secretary of State use only

B0984-4576 03/04/2025 11:34 AM Received by Office of the Idaho Secretary of State