





STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0005496835

Date Filed: 12/4/2023 10:04:57 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below) | Same Da | Same Day Service (+\$100; filing fee \$200) | |
|--|---|--|--|
| 1. Limited Liability Company Name | | | |
| Type of Limited Liability Company | Limited L | Limited Liability Company | |
| Entity name | Bridge Solutions I LLC | | |
| 2. The complete street address of the principal office is: | | | |
| Principal Office Address | | CLAY ESPLIN 275 SOUTH 5TH AVE STE 151 | |
| | | POCATELLO, ID 83201 | |
| 3. The mailing address of the principal office is: | | | |
| Mailing Address | CLAY ESPLIN 275 S 5TH AVE STE 151 POCATELLO, ID 83201-6418 | | |
| Registered Agent Name and Address | | , | |
| Registered Agent | Clay Esp Register | olin ed Agent | |
| | Physical A | Physical Address | |
| | STE 151 | 275 SOUTH 5TH AVE STE 151 | |
| | | POCATELLO, ID 83201 Mailing Address | |
| | | 275 S 5TH AVE STE 151 POCATELLO, ID 83201-6418 | |
| ☑ I affirm that the registered agent appointed has consent | | | |
| Tallim that the regional agent appointed has sensone | | o regional agent for time entity. | |
| 5. Governors | | | |
| Name | | Address | |
| Clay & Samantha Esplin Family LLLP | | CLAY ESPLIN 275 SOUTH 5TH AVE STE 151 | |

POCATELLO, ID 83201

12/04/2023

Date

Signature of Organizer:

CLAY ESPLIN

Sign Here