







## 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 #: 0005576196

01/31/2024

Date

Date Filed: 1/31/2024 11:30:33 AM

| ertificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Se descriptions below) | rvice (see Standard (filing fee \$100)                    |
|---|---|
| Limited Liability Company Name  |   |
| Type of Limited Liability Company   | Limited Liability Company                                 |
| Entity name   | Papi Jai's Services LLC                                   |
| . The complete street address of the principal office is:   |   |
| Principal Office Address  | 421 BRACKEN ST N<br>TWIN FALLS, ID 83301                  |
| . The mailing address of the principal office is:   |   |
| Mailing Address   | 421 BRACKEN ST N<br>TWIN FALLS, ID 83301-4515             |
| . Registered Agent Name and Address   |   |
| Registered Agent  | Registered Agent  |
|   | Juliana G Flores  |
|   | Physical Address:<br>421 BRACKEN ST N                     |
|   | TWIN FALLS, ID 83301                                      |
|   | Mailing Address:  |
|   | 421 BRACKEN ST N  |
|   | TWIN FALLS, ID 83301-4515                                 |
| I affirm that the registered agent appointed has  | s consented to serve as registered agent for this entity. |
| . Governors   |   |
| Name  | Address   |
| Juliana G Flores  | 421 BRACKEN ST N  |
|   | TWIN FALLS, ID 83301                                      |
|   |   |
| ignature of Organizer:  |   |

Juliana G Flores

Sign Here