3/003

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 7017 FEB. 14 JULY 2017



Rev. 11/2015

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2017 FEB 16 AN II: 38 SECRETARY OF STATE

Complete and submit the application in duplicate.		CTOS 65 BANG
The name of the limited lia     TFES 618, LLC	bility company is:	
(Remember or implice the	words "Emited Liability Company," "Li	mited Company," or the abbreviations L.L.C., LLC, or LC)
<ol> <li>The complete street and m 580 JENSEN GROVE DR.</li> </ol>	ailing addresses of the princi	pal office is:
(Street Accross) PO BOX 339, BLACKFOO	T, ID 83221	
Abeling Adoress, it ciliments		
3. The name of the registered	dagent and the street addres	s of the registered agent:
Title Financial Specialty Se	ervices, Inc 580 Jensen Grove	e Dr. Blackfoot, ID 83221
(Marrie)	(Admess cannot be a pos	office box or postal mail box.)
Shauna Romrell, Presiden	at least one governor of the li	
(New S)	(Address)	
(Nar #)	(Address)	
(Martie)	(Address)	
(Name)	(Address)	
5. Mailing address for future PO Box 339, Blackfoot, ID	correspondence (annual repo 83221	rt notices):
Signature of organizer(s):	_	
Signature.		Secretary of State use only
Printed Name: Shauna Romrell	President	
gnature:		IDAHO SECRETARY OF STATE  02/16/2017 05:00  CK:PREPAID CT:127288 BH:1569379  10 100:00 = 100:00 ORGAN LLC #3
rinted Name:		16 20.00 = 20.00 EXPEDITE C #3

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