





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 #: 0006077118

Date Filed: 1/22/2025 10:45:35 AM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Sedescriptions below) | ervice (see Standard (filing fee \$100) |
|---|---|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | Christy Lee, LLC. |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | CHRISTY MACIAS 5923 W. SOUTH SLOPE RD. EMMETT, ID 83617 |
| 3. The mailing address of the principal office is: | |
| Mailing Address | CHRISTY MACIAS |
| | 5923 W SOUTH SLOPE RD EMMETT, ID 83617-8831 |
| 4. Registered Agent Name and Address | |
| Registered Agent | Christy Macias |
| | Registered Agent |
| | Physical Address |
| | 5923 WEST SOUTH SLOPE ROAD EMMETT, ID 83617 |
| | Mailing Address |
| | 5923 W SOUTH SLOPE RD |
| | CHRISTY MACIAS EMMETT, ID 83617-8831 |
| I affirm that the registered agent appointed has 5. Governors | as consented to serve as registered agent for this entity. |
| Name | Address |
| | |
| Christy Lee Macias | 5923 W SOUTH SLOPE RD EMMETT, ID 83617 |
| Signature of Organizer: | |
| Christy Lee Macias | 01/22/2025 |
| Sign Here | Date |