



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

-FILED-

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1. The name of the limited liability company is:

TMS Jones, LLC

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

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

223 Larch St **Priest River** **ID** **83856**

(Street Address)

(Mailing Address, if different)

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

Northwest Registered Agent LLC **784 S. Clearwater Loop** **STE B Post Falls** **ID** **83856**

(Name)

(Address)

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

Tatum **Schiwal Jones** **223 Larch St. Priest River** **ID** **83856**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

223 Larch St Priest River ID 83856

(Mailing Address)

Signature of organizer(s).

Printed Name: **Tatum** **Schiwal Jones**

Signature: 

Printed Name: _____

Signature: _____

Secretary of State use only