







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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 #: 0004446293

Date Filed: 10/14/2021 1:10:09 PM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (s descriptions below) | see Standard (filing fee \$100) |
|--|---|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | SaltiWords Productions LLC |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | CORINA MONORAN |
| | 1659 SMITH AVE UNIT 4 |
| | NAMPA, ID 83651 |
| 3. The mailing address of the principal office is: | |
| Mailing Address | CORINA MONORAN |
| | 1659 SMITH AVE UNIT 4 |
| | NAMPA, ID 83651-7549 |
| 4. Registered Agent Name and Address | 5 |
| Registered Agent | Registered Agent Corina Monoran |
| | Physical Address: |
| | CORINA MONORAN |
| | 1659 SMITH AVE |
| | UNIT 4 |
| | NAMPA, ID 83651 |
| | Mailing Address: CORINA MONORAN |
| | 1659 SMITH AVE UNIT 4 |
| | NAMPA, ID 83651-7549 |
| ☑ I affirm that the registered agent appointed has conse | ented to serve as registered agent for this entity. |
| 5. Governors | |
| Name | Address |
| 16 | CORINA MONORAN |
| | 659 SMITH AVE |
| | JNIT 4 |
| | NAMPA, ID 83651 |
| Signature of Organizer: | |
| Corina Monoran | 10/14/2021 |
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