

Signature___

Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Giles, LLC The complete street and mailing addresses of the initial designated/principal office: 1155 E. Winding Creek Drive Eagle, Idaho 83616 (Street Address) (Mailing Address, if different than street address) The name and complete street address of the registered agent: Idaho Estate Planning, P.C. 1155 E. Winding Creek Drive Eagle, ID 83616 (Street Address) The name and address of at least one member or manager of the limited liability		LITY COMPANY	09 MAR 23 AM 8: 15 SECHETARY OF STATE
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	The name and address of at leas company: Name Mark Owen - Manager Mailing address for future corres	Additional report not	dress Court Eagle, Idaho 83616 Lices):
	The name and address of at lease company: Name Mark Owen - Manager Mailing address for future corresponders.	Add 3030 W. Champange C pondence (annual report not ading Creek Drive Eagle, Idaho 83	dress Court Eagle, Idaho 83616 Lices):
	The name and address of at leas company: Name Mark Owen - Manager Mailing address for future corres	Add 3030 W. Champange C pondence (annual report not ading Creek Drive Eagle, Idaho 83	dress Court Eagle, Idaho 83616 Lices):
ature of organizer(s). (An organizer is a member, or is	The name and address of at least company: Name Mark Owen - Manager Mailing address for future corresponders. 1155 E. Win Future effective date of filing (options)	Add 3030 W. Champange Compondence (annual report not adding Creek Drive Eagle, Idaho 83	dress Court Eagle, Idaho 83616 Lices):

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