





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 #: 0005037930

Date Filed: 12/24/2022 12:33:34 PM

| Select one: Standard, Expedited or Same Day S descriptions below) | Service (see Standard (filing fee \$100) | |
|-------------------------------------------------------------------|-------------------------------------------------------------|--|
| . Limited Liability Company Name | | |
| Type of Limited Liability Company | Limited Liability Company | |
| Entity name | Albion Heritage LLC | |
| 2. The complete street address of the principal office is: | | |
| Principal Office Address | CHRIS GORDON | |
| | 3757 RED RIVER ROAD | |
| | ELK CITY, ID 83525 | |
| 3. The mailing address of the principal office is: | | |
| Mailing Address | CHRIS GORDON | |
| | 3757 RED RIVER RD ELK CITY, ID 83525-5010 | |
| | ELR GIT1, ID 03323-3010 | |
| Registered Agent Name and Address | | |
| Registered Agent | Registered Agent | |
| | Christopher W Gordon | |
| | Physical Address: CHRIS GORDON | |
| | 3757 RED RIVER ROAD | |
| | ELK CITY, ID 83525 | |
| | Mailing Address: | |
| | CHRIS GORDON | |
| 3757 RED RIVER RD ELK CITY, ID 83525-5010 | | |
| | | |
| I affirm that the registered agent appointed h | nas consented to serve as registered agent for this entity. | |
| . Governors | | |
| Name | Address | |
| Christopher W Gordon | CHRIS GORDON | |
| | 3757 RED RIVER ROAD | |
| | ELK CITY, ID 83525 | |
| Victoria L Gordon | CHRIS GORDON | |
| | 3757 RED RIVER ROAD | |
| | ELK CITY, ID 83525 | |

Print & Mail Enclosures

Sign Here

I understand the document can ONLY be filed if the following items are included:





Payment in the amount of \$100.00 (if expedited, \$140; if 24 hours processing, \$200) - checks payable to the Secretary of State, signed and recently dated.

This filing form (submit within 30 days) with the required signature(s).

If you are submitting a correction, return the correction letter with your updated document.

STATEMENT OF DOMESTICATION

| 1. | Name, jurisdiction and type of the domestical | ting entity: |
|-------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| | Name: Pleasant Valley Garden Center LLC Jurisdiction: WA State Type of Entity: LLC | |
| 2. | Name, jurisdiction and type of the domestica | ted entity: |
| | Name: Albion Heritage LLC Jurisdiction: Idaho State Type of Entity: LLC | |
| 3. | Effective date of domestication: | Upon filing |
| (T | This date may not be more than ninety (90) days aft | er the date of filing.) |
| 4. | the domesticating entity is a foreign entity accordance with the law of its jurisdiction of | |
| 5. | the domesticated entity is a domestic filing document is shown in the document attached | |
| 6. | the domesticated entity is a foreign entity entity, and the mailing address to which the sprocess served on the secretary of state is: | <u> </u> |
| | entity, and the mailing address to which the sprocess served on the secretary of state is: | <u> </u> |
| Signa | ature of Domesticating Entity: | |

member

Print name and title