



0004148863

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

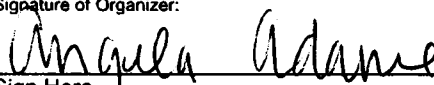
Filing Fee: \$100.00

For Office Use Only

**-FILED-**

File #: 0004148863

Date Filed: 2/1/2021 10:00:50 AM

| Certificate of Organization Limited Liability Company   |  |      |         |              |  |
|---|--|------|---------|--------------|--|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)  | Standard (filing fee \$100)  |      |         |              |  |
| 1. Limited Liability Company Name   |  |      |         |              |  |
| Type of Limited Liability Company   | Limited Liability Company  |      |         |              |  |
| Entity name   | Adame Enterprises L.L.C.   |      |         |              |  |
| 2. The complete street address of the principal office is:  |  |      |         |              |  |
| Principal Office Address  | ANGELA ADAME<br>378 W 450 S<br>HEYBURN, ID 83336   |      |         |              |  |
| 3. The mailing address of the principal office is:  |  |      |         |              |  |
| Mailing Address   | ANGELA ADAME<br>378 W 450 S<br>HEYBURN, ID 83336-7636  |      |         |              |  |
| 4. Registered Agent Name and Address  |  |      |         |              |  |
| Registered Agent  | Registered Agent<br>Angela Adame<br>Physical Address:<br>ANGELA ADAME<br>378 W 450 S<br>HEYBURN, ID 83336<br>Mailing Address:<br>ANGELA ADAME<br>378 W 450 S<br>HEYBURN, ID 83336-7636 |      |         |              |  |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.  |  |      |         |              |  |
| 5. Governors  |  |      |         |              |  |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Angela Adame</td><td>ANGELA ADAME<br/>378 W 450 S<br/>HEYBURN, ID 83336</td></tr></tbody></table> |  | Name | Address | Angela Adame | ANGELA ADAME<br>378 W 450 S<br>HEYBURN, ID 83336 |
| Name  | Address  |      |         |              |  |
| Angela Adame  | ANGELA ADAME<br>378 W 450 S<br>HEYBURN, ID 83336   |      |         |              |  |
| Signature of Organizer:   |  |      |         |              |  |
| Sign Here    | Date <u>2/1/21</u>   |      |         |              |  |
| Print & Mail Enclosures   |  |      |         |              |  |
| <input checked="" type="checkbox"/> 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.  |  |      |         |              |  |

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