

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

08 AUG 22 AM 9: 01

1. The name of the limited liability comp	pany is: SECRETARY OF STATE STATE OF IDAHO
	TDJLLC
2. The complete street and mailing addr	resses of the initial designated/principal office:
	ood Garden City, ID 83714
(Street Address) PO Box	8084 Boise, ID 83707
(Mailing Address, if different than street address)	
3. The name and complete street address	ss of the registered agent:
Heidi Dumont	4753 Glenwood Garden City ID 83714
(Name)	(Street Address)
The name and address of at least one company:	e member or manager of the limited liability
<u>Name</u>	<u>Address</u>
Heidi Dumont	4753 Glenwood Garden City ID 83714
Ted Dumont	4753 Glenwood Garden City ID 83714
WM-st-st-st-st-st-st-st-st-st-st-st-st-st-	
5. Mailing address for future correspond	
PO Box	x 8084 Boise ID 83707
	n
6. Future effective date of filing (optional	I):
Signature of organizer(s). (An organizer is a nacting in behalf of a member or members).	nember, or is
acting in behalf of a member of members).	Secretary of State use only
Signature Cudi Jummy	
Typed Name: Heidi Dumont	ق ا
401	IDAHO SECRETARY OF STATE
Signature (F)	ON GRAN LLC # 6
Typed Name: Ted Dumont	

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