



0003956782

**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 #: 0003956782

Date Filed: 8/4/2020 1:34:08 PM

| 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  | Idaho Log Repair LLC  |      |         |                       |   |                     |   |
| 2. The complete street address of the principal office is:   |   |      |         |                       |   |                     |   |
| Principal Office Address   | 9169 W. STATE STREET<br>120<br>GARDEN CITY, ID 83714  |      |         |                       |   |                     |   |
| 3. The mailing address of the principal office is:   |   |      |         |                       |   |                     |   |
| Mailing Address  | 601 MAR VISTA DR<br>LOS OSOS, CA 93402-3809   |      |         |                       |   |                     |   |
| 4. Registered Agent Name and Address   |   |      |         |                       |   |                     |   |
| Registered Agent   | REGISTERED AGENTS INC<br>Commercial Registered Agent<br>Physical Address<br>784 S CLEARWATER LOOP STE R<br>POST FALLS, ID 83854<br>Mailing Address<br>784 S CLEARWATER LOOP STE R<br>POST FALLS, ID 83854 |      |         |                       |   |                     |   |
| <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>Christopher G Sandeck</td><td>601 MAR VISTA AVE<br/>LOS OSOS, CA 93402</td></tr><tr><td>Jonathan A Cassaday</td><td>4438 E DOUGLAS AVE<br/>VISALIA, CA 93292</td></tr></tbody></table> |   | Name | Address | Christopher G Sandeck | 601 MAR VISTA AVE<br>LOS OSOS, CA 93402 | Jonathan A Cassaday | 4438 E DOUGLAS AVE<br>VISALIA, CA 93292 |
| Name   | Address   |      |         |                       |   |                     |   |
| Christopher G Sandeck  | 601 MAR VISTA AVE<br>LOS OSOS, CA 93402   |      |         |                       |   |                     |   |
| Jonathan A Cassaday  | 4438 E DOUGLAS AVE<br>VISALIA, CA 93292   |      |         |                       |   |                     |   |
| Signature of Organizer:  |   |      |         |                       |   |                     |   |
| <u>Christopher G Sandeck</u>   | <u>08/04/2020</u>   |      |         |                       |   |                     |   |
| Sign Here  | Date  |      |         |                       |   |                     |   |

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