



0004371594



**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 #: 0004371594

Date Filed: 8/5/2021 4:47:57 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  | POST FALLS CK MANAGER, LLC   |
| 2. The complete street address of the principal office is:   |  |
| Principal Office Address   | 225 W MAIN AVE<br>STE 200<br>SPOKANE, WA 99201   |
| 3. The mailing address of the principal office is:   |  |
| Mailing Address  | 225 W MAIN AVE<br>STE 200<br>SPOKANE, WA 99201-0208  |
| 4. Registered Agent Name and Address   |  |
| Registered Agent   | Registered Agent<br>TYLER BLACK<br>Physical Address:<br>601 E FRONT AVE<br>SUIT 303<br>COEUR D' ALENE, ID 83814-5186<br>Mailing Address:<br>601 E FRONT AVE<br>STE 303<br>COEUR D ALENE, ID 83814-5186 |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity. |  |
| 5. Governors   |  |
|  |  |
| Name   | Address  |
| BEN HAWKINS  | 225 W MAIN AVE<br>STE 200<br>SPOKANE, WA 99201   |
| Signature of Organizer:  |  |
| <i>Ashley Hopkins</i>  | <u>08/05/2021</u>  |
| Sign Here  | Date   |

B0631-6199 08/05/2021 4:50 PM Received by ID Secretary of State Lawrence Denney