





STATE OF IDAHO Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

-FILED-

File #: 0005047321

Date Filed: 1/3/2023 12:15:28 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Servi descriptions below)	ice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	ALMOND ADVENTURES AND SHUTTLE LLC
2. The complete street address of the principal office is:	
Principal Office Address	584 WEST 40 SOUTH BLACKFOOT, ID 83221
3. The mailing address of the principal office is:	
Mailing Address	PO BOX 514 ISLAND PARK, ID 83429-0514
4. Registered Agent Name and Address	
Registered Agent	Registered Agent KERRY ALMOND
	Physical Address:
	584 WEST 40 SOUTH BLACKFOOT, ID 83221
	Mailing Address:
	KERRY ALMOND
	PO BOX 514 ISLAND PARK, ID 83429-0514
I affirm that the registered agent appointed has o	consented to serve as registered agent for this entity.
Name	Address
	O BOX 514 SLAND PARK, ID 83429
	
Signature of Organizer:	1/2/1/12

Print & Mail Enclosures

Şign 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.

