





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 For Office Use Only

-FILED-

File #: 0006070590

01/14/2025

Date

Date Filed: 1/14/2025 4:38:39 PM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Se descriptions below) | ervice (see Standard (filing fee \$100) |
|--|---|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | All Season Detail LLC |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | 390 CHATEAU DR IDAHO FALLS, ID 83404 |
| 3. The mailing address of the principal office is: | |
| Mailing Address | 390 CHATEAU DR IDAHO FALLS, ID 83404-7819 |
| 4. Registered Agent Name and Address | |
| Registered Agent | Nikka Jones Registered Agent |
| | Physical Address |
| | 3758 DOVE DR POCATELLO, ID 83201 |
| | Mailing Address |
| | 3758 DOVE DR POCATELLO, ID 83201-5502 |
| ☑ I affirm that the registered agent appointed ha | s consented to serve as registered agent for this entity. |
| 5. Governors | |
| Name | Address |
| | 90 CHATEAU DR DAHO FALLS, ID 83404 |

390 CHATEAU DR IDAHO FALLS, ID 83404

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Cindy Gonzalez

Signature of Organizer:

Juan Gonzalez

Sign Here