



Revised 12/2018

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

For Office Use Only

B0421-8650

-FILED-

File #: 0003755265

*	W 7 W	i0, Chapters 21 and Filing fee: \$100.00 + \$	l 25, Idaho Code 620.00 for manual proce	ssing ( <u>form must be</u>	Date Filed: 1/24/2020 11:16:00 AM <b>typed).</b>	
1.		limited liability comp				24/2020
	(Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)					11
2.	The complete street and mailing addresses of the principal office is:					· ••
	1810 N. Keystone Ct. #4, Post Falls, ID 83854					0
	(Street Address)					AM
	(Mailing Address, if different)					
3.	The name and complete street address of the registered agent:					Ç
	Craig MacLachlan 1810 N Keystone Ct. #4, Post Falls, ID 83854					Receive
						<u>.</u>
4.	The name and address of at least one governor of the limited liability company:					γq
	Craig MacLa	chlan	1810 N Keystone Ct. #4, Post Falls, ID 83854			
	,		,			<del>   </del>
						0 0 0
	(Name)		(Address)			
						cretary
	Mame) (Address)					4
						9
	(Name) (Address)					Ø
5.	Mailing address for future correspondence (annual report notices):					tat
	1810 N Keystone Ct. #4, Post Falls, ID 83854					C†
	(Mailing Address)					Ľ
Sign	nature of organizer	(s).				3. ME
Prin	ted Name: Craic	MacLachlan		Secre	etary of State use only	Lawerence
		11.				ğ
Sign	nature:	2/1/h/	4/			-
Prin	ted Name:					Denney
Sign	nature:					Уe