



0004621111

**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 #: 0004621111

Date Filed: 2/23/2022 12:13:14 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  | Recovery Community Development Company, LLC.  |      |         |                   |                                       |
| 2. The complete street address of the principal office is:   |   |      |         |                   |                                       |
| Principal Office Address   | CLIFFORD C MECHAM<br>11605 W FLORIDA DR<br>BOISE, ID 83709  |      |         |                   |                                       |
| 3. The mailing address of the principal office is:   |   |      |         |                   |                                       |
| Mailing Address  | CLIFFORD C MECHAM<br>11605 W FLORIDA DR<br>BOISE, ID 83709-1149   |      |         |                   |                                       |
| 4. Registered Agent Name and Address   |   |      |         |                   |                                       |
| Registered Agent   | Registered Agent<br>Clifford C Mecham<br>Physical Address:<br>CLIFFORD C MECHAM<br>11605 W FLORIDA DR<br>BOISE, ID 83709<br>Mailing Address:<br>CLIFFORD C MECHAM<br>11605 W FLORIDA DR<br>BOISE, ID 83709-1149 |      |         |                   |                                       |
| <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>Clifford C Mecham</td><td>11605 W FLORIDA DR<br/>BOISE, ID 83709</td></tr></tbody></table> |   | Name | Address | Clifford C Mecham | 11605 W FLORIDA DR<br>BOISE, ID 83709 |
| Name   | Address   |      |         |                   |                                       |
| Clifford C Mecham  | 11605 W FLORIDA DR<br>BOISE, ID 83709   |      |         |                   |                                       |
| Signature of Organizer:  |   |      |         |                   |                                       |
| <u>Clifford C Mecham</u>   | <u>02/23/2022</u>   |      |         |                   |                                       |
| Sign Here  | Date  |      |         |                   |                                       |

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