



0003714880

For Office Use Only

**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 - Make Checks Payable to Secretary of State

-FILED-

File #: 0003714880

Date Filed: 12/23/2019 4:55:56 PM

B0421-5120 12/27/2019 10:18 AM Received by ID Secretary of State Lawrence Denney

| 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 | Guardian Data, LLC | | | | | | |
| 2. The complete street address of the principal office is: | | | | | | | |
| Principal Office Address | JACOB LEWIS 5028 CASTLETON AVE NAMPA, ID 83686 | | | | | | |
| 3. The mailing address of the principal office is: | | | | | | | |
| Mailing Address | JACOB LEWIS 5028 CASTLETON AVE NAMPA, ID 83686-5592 | | | | | | |
| 4. Registered Agent Name and Address | | | | | | | |
| Registered Agent | Registered Agent JACOB LEWIS Physical Address: JACOB LEWIS 5028 CASTLETON AVE NAMPA, ID 83686 Mailing Address: JACOB LEWIS 5028 CASTLETON AVE NAMPA, ID 83686-5592 | | | | | | |
| 5. Governors | | | | | | | |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>JACOB LEWIS</td><td>JACOB LEWIS 5028 CASTLETON AVE. NAMPA, ID 83686</td></tr><tr><td>RANDY PALMER</td><td>5028 CASTLETON AVE. NAMPA, ID 83686</td></tr></tbody></table> | | Name | Address | JACOB LEWIS | JACOB LEWIS 5028 CASTLETON AVE. NAMPA, ID 83686 | RANDY PALMER | 5028 CASTLETON AVE. NAMPA, ID 83686 |
| Name | Address | | | | | | |
| JACOB LEWIS | JACOB LEWIS 5028 CASTLETON AVE. NAMPA, ID 83686 | | | | | | |
| RANDY PALMER | 5028 CASTLETON AVE. NAMPA, ID 83686 | | | | | | |
| Signature of Organizer: <u>Julie Adams DeFord</u> <u>12/23/2019</u> | | | | | | | |
| Sign Here _____ Date _____ | | | | | | | |
| Print & Mail Enclosures | | | | | | | |
| <input checked="" type="checkbox"/> 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. | | | | | | | |

