





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

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-FILED-

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Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)	Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	TFES 1194, LLC
2. The complete street address of the principal office is:	
Principal Office Address	SHAUNA ROMRELL
	580 JENSEN GROVE DR
	BLACKFOOT, ID 83221
3. The mailing address of the principal office is:	
Mailing Address	SHAUNA ROMRELL
	PO BOX 339 BLACKFOOT, ID 83221-0339
4. Registered Agent Name and Address	
Registered Agent	Registered Agent SHAUNA ROMRELL
	Physical Address:
	SHAUNA ROMRELL
	580 JENSEN GROVE DR
	BLACKFOOT, ID 83221-1681
	Mailing Address:
	SHAUNA ROMRELL PO BOX 339
	BLACKFOOT, ID 83221-0339
I affirm that the registered agent appointed has consented	to serve as registered agent for this entity.
Name	Address
Title Financial Specialty Services, Inc	SHAUNA ROMRELL 580 JENSEN GROVE DR BLACKFOOT, ID 83221
Signature of Organizer:	
Audra Perez	06/06/2025
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