







STATE OF IDAHO

Office of the secretary of state, Lawerence 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 #: 0004623900

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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	Greenwood Estates LLC
2. The complete street address of the principal office is:	
Principal Office Address	195 JASPER LOOP PONDERAY, ID 83852
3. The mailing address of the principal office is:	
Mailing Address	195 JASPER LOOP PONDERAY, ID 83852-5101
4. Registered Agent Name and Address	
Registered Agent	Registered Agent
	EMMA HUSTIS Physical Address:
	195 JASPER LOOP
	PONDERAY, ID 83852
	Mailing Address:
	195 JASPER LOOP PONDERAY, ID 83852-5101
☐ I affirm that the registered agent appointed has consented ☐ ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented ☐ I affirm that the registered agent appointed has consented agent	to serve as registered agent for this entity.
Name	Address
KYLE GREENWOOD	195 JASPER LOOP
NILE GREENWOOD	PONDERAY, ID 83852
Signature of Organizer:	PONDERAY, ID 83852
	PONDERAY, ID 83852 02/25/2022