







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 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0003901595

Date Filed: 6/5/2020 12:26:10 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 | | Summerbrook Farm LLC | Summerbrook Farm LLC | |
| The complete street address of the principal office is: Principal Office Address | | 3285 SHADOW HILLS DRIVE EAGLE, ID 83616 | | |
| 3. The mailing address of the principal office is | : | | | |
| Mailing Address | | 3285 SHADOW HILLS DR EAGLE, ID 83616-2715 | | |
| 4. Registered Agent Name and Address | | | | |
| Registered Agent | | Registered Agent Barbara HOlt Physical Address: 3285 SHADOW HILLS DRIV EAGLE, ID 83616 Mailing Address: 3285 SHADOW HILLS DR EAGLE, ID 83616-2715 | /Ε | |
| I affirm that the registered ager | t appointed has consented t | o serve as registered agent for th | is entity. | |
| 5. Governors | | | | |
| Name | | Address | | |
| Barbara Holt | | 3285 SHADOW HILLS DR EAGLE, ID 83616-2715 | | |
| Signature of Organizer: | | | | |
| Scott Tschirgi | | | 06/05/2020 | |
| Sign Here | | | _ | |