





-FILED-

File #: 0005602341

Date Filed: 2/13/2024 1:25:46 PM



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

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Se descriptions below) | ervice (see Expedited (+\$40; filing fee \$140) |
|--|---|
| 1. Limited Liability Company Name | |
| Type of Limited Liability Company | Limited Liability Company |
| Entity name | AURUM NW LLC |
| 2. The complete street address of the principal office is: | |
| Principal Office Address | VITALY MICHKA 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854 |
| 2. The wailing address of the principal office is: | 1 001 17LE0, 15 00004 |
| The mailing address of the principal office is: Mailing Address | VITALY MICHKA PO BOX 3143 POST FALLS, ID 83877-3143 |
| 4. Registered Agent Name and Address | |
| Registered Agent | REGISTERED AGENTS INC Commercial Registered Agent |
| | Physical Address |
| | 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854 |
| | Mailing Address |
| | 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854 |
| ☑ I affirm that the registered agent appointed has | as consented to serve as registered agent for this entity. |
| 5. Governors | |
| Name | Address |
| VITALY MICHKA | VITALY MICHKA PO BOX 3143 POST FALLS, ID 83877 |
| Signature of Organizer: | |
| Vitaly Michka | 02/13/2024 |
| Sign Here | Date |