



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

For Office Use Only -FILED- File #: 0004600620 Date Filed: 1/25/2022 12:46:00 PM	30657-8 <u>006 01/2</u> 5/2022
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1.		of the limited liabil	LLC		ited Company "on the other	bea.	
	(Remember to include the words "Limited Liability Company," "Limited Company, "or the abbrevi						
2.	2. The complete street and mailing addresses of the principal office is: 6389 Maggie Drive Idaho Falls, Idaho 83402						
	(Street Add	ress)					
	(Mailing Add	dress, if different)					
3.	3. The name and complete street address of the registered agent:						
	Lindee	Stone	6389	Maggie	Drive Idaho Fa	alls	
	(Name)		(Address				
4.	4. The name and address of at least one governor of the limited liability comp						
	Jordan	Stone	6389	Maggie	Drive Idaho Fa	alls	
	(Name)		(Addres	s)			
	Lindee S	Stone	6389	Maggie D	rive Idaho Falls	ID	
	(Name)		(Addres	s)			
	(Name)		(Addres	s)			
	(Name)		(Addres	s)			
5	Mailing ad	dress for future co	rresnondence (annu	al report n	ntices):		
Э.	5. Mailing address for future correspondence (annual report notices):						
	(Mailing		ho Falls, Idaho	83402			
Signa	ature of org	janizer(s).					
Printe	ed Name:	Lindee Stone			Secre	tary o	
Signa	ature:	Jule C	tone	_			
Printe	ed Name:	Jordan Stone					
Signa	ature:	b-A	7	_			
Revised	12/2018						