







For Office Use Only

-FILED-

File #: 0006132432

Date

Date Filed: 2/28/2025 4:51:46 PM

Certificate of Organization Limited Liab Select one: Standard, Exped descriptions below)	ollity Company lited or Same Day Service (see	Standard (filing fee \$100)	
. Limited Liability Company Name			
Type of Limited Liability Company		Limited Liability Company	
Entity name		80 Rainbow Bend, LLC	
2. The complete street address of the p	principal office is:		
Principal Office Address		LOUIS COHEN 1009 BAYSIDE COVE NEWPORT BEACH, CA 92660	
3. The mailing address of the principal	office is:		
Mailing Address		1009 BAYSIDE CV NEWPORT BEACH, CA 92660-7422	
Registered Agent Name and Addres			
Registered Agent		Registered Agent	
		Aaron Hill	
		Physical Address: 80 RAINBOW BEND, LLC	
		102 APACHE DR	
		HAILEY, ID 83333-8482	
		Mailing Address:	
		80 RAINBOW BEND, LLC	
		102 APACHE DR	
		HAILEY, ID 83333-8482	
I affirm that the registered	d agent appointed has consented	I to serve as registered agent for this entity.	
i. Governors			
Name		Address	
Ivan Moad	1915 LEEWARD LANE NEWPORT BEACH, CA	1915 LEEWARD LANE NEWPORT BEACH, CA 92660	
Louis Cohen	1009 BAYSIDE COVE NEWPORT BEACH, CA	92660	
Signature of Organizer:			
Signature of Organizer: Ivan Moad		02/28/2025	

Sign Here