

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2016 DEC -1 PM 3 16

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE STATE OF IDAHO

	Complete and submit th	e application in <u>duplicate</u>	,	
1,	The name of the limited liability	company is:		;
	TFES 613, LLC			
	(Remember to include the words	s "Limited Liability Company," "	imited Company," or the abbreviations L.L.C., LLC, or LC)	_
2.	The complete street and mailing	addresses of the princ	rinal office is:	
	580 Jensen Grove Dr., Blackfoot, ID 83221			
	(Street Address)	,		
	PO Box 339, Blackfoot, ID 8322	21		
	(Mailing Address, if different)			
3.	The name of the registered agent and the street address of the registered agent:			
	Title Financial Specialty Services Inc 580 Jensen Grove Dr., Blackfoot, ID 83221			
	(Name)		st office box or postal mail box.)	
4.	The name and address of at least one governor of the limited liability company:			
	Shauna Romrell, President	PO Box 339, Blackfoot, ID 83221		
	(Name)	(Address)		
	(Name)	(Address)		
		(,		
	(Name)	(Address)		
		(Address)		
	(Name)	(Address)		
	·	(Address)		_
5,	Mailing address for future corres	pondence (annual rend	ort notices):	
	PO Box 339, Blackfoot, ID 8322	1		
	(Address)			
Sign	ature of organizer(s).	-		
Sign	ature:		Secretary of State use only	
	21.5			
Print	ted Name: Shauna Romrell, Presi	dent	IDAHO SECRETARY OF STATE	
			12/01/2016 05:00	
Signature:			CK:PREPAID CT:127288 BH:1557	
2rint	ed Name:		1@ 100.00 = 100.00 ORGAN LLC 1@ 20.00 = 20.00 EXPEDITE C	
kev. 11/2015			W174913	
		<u> </u>	10111	