



Reset Form



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed)

For Office Use Only

-FILED-

File #: 0005491532

Date Filed: 11/20/2023 11:47:00 AM

1. The name of the limited liability company is:
Desert Properties Limited Liability Company

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:
1004 E Teton Ave Post Falls, ID 83854

(Street Address)

(Mailing Address, if different)

3. The name and complete street address of the registered agent:

Susan Owens

1004 E Teton Ave Post Falls, ID 83854

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Same as #3

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

Same as #2

(Mailing Address)

Signature of organizer(s).

Printed Name: Susan Owens

Signature: 

Printed Name: _____

Signature: _____

Secretary of State use only