



## **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

2. The complete street and mailing addresses of the principal office is:

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

2115 E Adelaide St Meridian, ID 83642

1. The name of the limited liability company is:

SplooshDaPool LLC

(Mailing Address, if different)

Sara Pippitt Young

(Street Address)

4444			
#  ## fil   #		For Office Use Only	
CERTIFICATE	OF ORGANIZATION	-FILED-	
	ILITY COMPANY	File #: 0004627926	
Title 30, Chapters 21 an		Date Filed: 2/10/2022 9:59:00 AM	
•	\$20.00 for manual processing (form must b	e typed).	
of the limited liability con	npany is:		
DaPool LLC	-		
Remember to include the words "	Limited Liability Company," "Limited Company, "or the	abbreviations L.L.C., LLC, or LC)	
ete street and mailing ad	dresses of the principal office is:		
Adelaide St Meridia	n, ID 83642		
ess)			
ress, if different)			
	ress of the registered agent:		
	-	02700	
pitt Young	605 S. Kiser Ave Boise, ID	03/09	
and address of at locat a	<b>,</b>	anv.	
	one governor of the limited liability compa		
her Johnson	2115 E. Adelaide St Merid	ian, 10 83642	
	(Address)		
	(Address)		
	(Address)		
	(Address)		
dress for future correspondence (annual report notices):			
Adelaide St Meridia	an, ID 83642	<del></del>	
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anizer(s).			
Christopher M Johr	nson Se	cretary of State use only	
MY			

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	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability company:			
	Christopher Johnson	2115 E. Adelaide St Meridian, ID 836	342	
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)	<del></del>	
5. Sign	Mailing address for future correspondent of the cor			
	ted Name: Christopher M John	NSON Secretary of State us	e onty	
Print	ted Name:			
Sign	ature:			
Revised	12/2016			
		I		