



0006017944

**STATE OF IDAHO****Office of the secretary of state, Phil McGrane  
CERTIFICATE OF ORGANIZATION LIMITED  
LIABILITY COMPANY**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$100.00

**For Office Use Only****-FILED-**

File #: 0006017944

Date Filed: 12/9/2024 1:27:09 PM

| Certificate of Organization Limited Liability Company<br>Select one: Standard, Expedited or Same Day Service (see descriptions below)  |                                  |      |         |             |                                  |             |                                  |
|--|----------------------------------|------|---------|-------------|----------------------------------|-------------|----------------------------------|
| 1. Limited Liability Company Name<br>Type of Limited Liability Company      Limited Liability Company<br>Entity name      Yeti Services LLC  |                                  |      |         |             |                                  |             |                                  |
| 2. The complete street address of the principal office is:<br>Principal Office Address      547 E ACCESS ST STE. 101<br>KUNA, ID 83634   |                                  |      |         |             |                                  |             |                                  |
| 3. The mailing address of the principal office is:<br>Mailing Address      547 E ACCESS ST<br>STE 101<br>KUNA, ID 83634-5615   |                                  |      |         |             |                                  |             |                                  |
| 4. Registered Agent Name and Address<br>Registered Agent      Registered Agent<br>Mary Peters<br>Physical Address:<br>547 E ACCESS ST STE. 101<br>KUNA, ID 83634<br>Mailing Address:<br>547 E ACCESS ST<br>STE 101<br>KUNA, ID 83634-5615    |                                  |      |         |             |                                  |             |                                  |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.   |                                  |      |         |             |                                  |             |                                  |
| 5. Governors   |                                  |      |         |             |                                  |             |                                  |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>Mary Peters</td><td>PO BOX 190030<br/>BOISE, ID 83719</td></tr><tr><td>Dean Peters</td><td>PO BOX 190030<br/>BOISE, ID 83719</td></tr></tbody></table> |                                  | Name | Address | Mary Peters | PO BOX 190030<br>BOISE, ID 83719 | Dean Peters | PO BOX 190030<br>BOISE, ID 83719 |
| Name   | Address                          |      |         |             |                                  |             |                                  |
| Mary Peters  | PO BOX 190030<br>BOISE, ID 83719 |      |         |             |                                  |             |                                  |
| Dean Peters  | PO BOX 190030<br>BOISE, ID 83719 |      |         |             |                                  |             |                                  |
| Signature of Organizer:  |                                  |      |         |             |                                  |             |                                  |
| <i>Mary Peters</i>   |                                  |      |         |             |                                  |             |                                  |
| Sign Here  |                                  |      |         |             |                                  |             |                                  |
| 12/09/2024   |                                  |      |         |             |                                  |             |                                  |
| Date   |                                  |      |         |             |                                  |             |                                  |