







## 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 #: 0005703069

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| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or San descriptions below) |                      | Same Day Service (+\$100; fili                    | ng fee \$200)  |
|--|----------------------|---|----------------|
| 1. Limited Liability Company Name  |                      |   |                |
| Type of Limited Liability Company  |                      | Limited Liability Company                         |                |
| Entity name  |                      | Halen Properties, LLC                             |                |
| <ol><li>The complete street address of the principal office<br/>Principal Office Address</li></ol>               | is:                  | 8260 RED PHEASANT BLVD<br>LEWISTON, ID 83501      |                |
| 3. The mailing address of the principal office is:   |                      |   |                |
| Mailing Address  |                      | 8260 RED PHEASANT BLVD<br>LEWISTON, ID 83501-6263 |                |
| 4. Registered Agent Name and Address   |                      |   |                |
| Registered Agent   |                      | Kennon Halen<br>Registered Agent                  |                |
|  |                      | Physical Address                                  |                |
|  |                      | 8260 RED PHEASANT BLVD<br>LEWISTON, ID 83501      |                |
|  |                      | Mailing Address                                   |                |
|  |                      | 8260 RED PHEASANT BLVD<br>LEWISTON, ID 83501-6263 |                |
| ☑ I affirm that the registered agent app   | ointed has consented | I to serve as registered agent for                | r this entity. |
| 5. Governors   |                      |   |                |
| Name   |                      | Address   |                |
| Kennon M Halen   |                      | 8260 RED PHEASANT BLVD<br>LEWISTON, ID 83501      |                |
| Signature of Organizer:  |                      |   |                |
| Kennon Halen   |                      |   | 04/24/2024     |
| Sign Here  |                      |   | Date           |