



## **CERTIFICATE OF ORGANIZATION**

				For Office Hee Only	B0853-04
P		CERTIFICATE OF		For Office Use Only -FILED-	0016
H	THE THE	LIMITED LIABILITY		File #: 0005468860	<u> </u>
16		Title 30, Chapters 21 and 25, Ida Base Filing fee: \$100.00 + \$20.00 fe		Date Filed: 11/2/2023 1:41:00 PM	<u>                                     </u>
		Dase I ming lee. \$100.00 + \$20.00 h	or manual processing ( <u>torm mi</u>	ist be typed).	•
1.		of the limited liability company is: Sawtooth Center, LLC			2023
	(Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)				1:4
2.	The complete street and mailing addresses of the principal office is:  2 Museum Dr. Stanley, ID 83278				=
	(Street Address)				<u>д</u>
	P O Box 75, Stanley, ID 83278				₩ m
•	(Mailing Address, if different)				••
3.	The name and complete street address of the registered agent:				ceive
	Lin Gray, Exec. Dir. SIHA 2 Museum Dr. Stanley, ID 83278				_ <del></del>
4		The name and address of at least one governor of the limited liability company:			
4.	Sawtooth Interpretive & Historical Association, Inc. 2 Museum Dr., Stanley, ID 83278				<b>о</b> А9
	(Name)		Museum Dr., Stant Address)	ey, ID 83278	Of H
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	(Name)	(	Address)		<u> </u>
					Н,
	(Name)		Address)		<del></del>
					H
	(Name)		Address)		daho
5.	Mailing address for future correspondence (annual report notices):			5	
	Lin Gray, P O Box 75, Stanley, ID 83278				<u>የ</u> 2 ወ
	(Mailing Address)				
Sign	ature of org	anizer(s).			retal
Printed Name: Paul, Hill					<del>- 5</del>
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Sign	ature: 🚈	<i>f f f f f f f f f f</i>			Hi Da
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rnni	ted Name:				ate
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Revised 12/2018					