



0005217058

**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 #: 0005217058

Date Filed: 5/2/2023 4:11:36 PM

<p>Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)</p> <p>1. Limited Liability Company Name Type of Limited Liability Company Entity name</p> <p>2. The complete street address of the principal office is: Principal Office Address</p> <p>3. The mailing address of the principal office is: Mailing Address</p> <p>4. Registered Agent Name and Address Registered Agent</p>		<p>Standard (filing fee \$100)</p> <p>Limited Liability Company A.R.2.R. L.L.C.</p> <p>3429 EAST 465 NORTH LEWISVILLE, ID 83431</p> <p>3429 E 465 N LEWISVILLE, ID 83431</p> <p>REGISTERED AGENTS INC Commercial Registered Agent Physical Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854 Mailing Address 784 S CLEARWATER LOOP STE R POST FALLS, ID 83854</p>				
<p><input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.</p> <p>5. Governors</p> <table border="1"> <tr> <td>Name</td> <td>Address</td> </tr> <tr> <td>Braxton Kidd</td> <td>3429 EAST 465 NORTH LEWISVILLE, ID 83431</td> </tr> </table> <p>Signature of Organizer:</p> <p><i>Braxton Kidd</i></p> <p>Sign Here</p> <p>05/02/2023</p> <p>Date</p>			Name	Address	Braxton Kidd	3429 EAST 465 NORTH LEWISVILLE, ID 83431
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