







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 #: 0005295894

Date Filed: 6/28/2023 11:05:30 PM

| Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same descriptions below) | e Day Service (see | Standard (filing fee \$100) | |
|---|----------------------|---|--|
| 1. Limited Liability Company Name | | | |
| Type of Limited Liability Company | | Limited Liability Company | |
| Entity name | | PWR LLC | |
| 2. The complete street address of the principal office i | s: | | |
| Principal Office Address | | 649 N 3515 E | |
| | | MENAN, ID 83434 | |
| 3. The mailing address of the principal office is: | | | |
| Mailing Address | | 649 N 3515 E # 242 | |
| | | MENAN, ID 83434-7701 | |
| Registered Agent Name and Address | | | |
| Registered Agent | | Registered Agent | |
| | | Noah Franz | |
| | | Physical Address: | |
| | | 649 N 3515 E | |
| | | MENAN, ID 83434 | |
| | | Mailing Address: 649 N 3515 E | |
| | | MENAN, ID 83434-7701 | |
| I affirm that the registered agent appo | ointed has consented | d to serve as registered agent for this entity. | |
| Name | | Address | |
| Noah Franz | 649 N 3515 E | | |
| | MENAN, ID 8 | | |
| | | | |
| Signature of Organizer: | | | |
| Noah Franz | | 06/28/2023 | |
| Sign Here | | Date | |