





## STATE OF IDAHO

## Office of the secretary of state, Lawerence Denney 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 #: 0004490850

Date Filed: 11/7/2021 7:43:45 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$100)
Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	JWorden LLC
2. The complete street address of the principal office is:	
Principal Office Address	559 FALLS AVE. W TWIN FALLS, ID 83301
3. The mailing address of the principal office is:	
Mailing Address	559 FALLS AVE W TWIN FALLS, ID 83301-3664
4. Registered Agent Name and Address	
Registered Agent  I affirm that the registered agent appointed has consented	Registered Agent Jonathan M Worden Physical Address: 559 FALLS AVE. W TWIN FALLS, ID 83301 Mailing Address: 559 FALLS AVE W TWIN FALLS, ID 83301-3664 ed to serve as registered agent for this entity.
5. Governors	
Name	Address
	559 FALLS AVE. W TWIN FALLS, ID 83301
Signature of Organizer:	
Jonathan Worden	11/07/2021
Jonathan Worden	• •