



Reset Form



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

**-FILED-**

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1. The name of the limited liability company is:  
Torres Treehouses LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:  
429 East Joshua Tree Dr

(Street Address)

Meridian, ID 83646

(Mailing Address, if different)

3. The name and complete street address of the registered agent:

Registered Agents Inc

784 S. Clearwater Loop, STE R Post Falls, ID 83854

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Tiffany Torres

429 East Joshua Tree Dr. Meridian, ID 83646

(Name)

(Address)

Juan H Torres

429 East Joshua Tree Dr. Meridian, ID 83646

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

429 East Joshua Tree Dr. Meridian, ID 83646

(Mailing Address)

Signature of organizer(s).

Printed Name: Tiffany Torres

Signature:

Printed Name: Juan H Torres

Signature:

Secretary of State use only

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