



0004276603

**STATE OF IDAHO***Office of the secretary of state, Lawrence 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 #: 0004276603

Date Filed: 5/6/2021 4:08:16 PM

| Certificate of Organization Limited Liability Company                                                                                                                                    |                                                                                                                                                                             |      |         |                 |                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|-----------------|-------------------------------------------------|
| Select one: Standard, Expedited or Same Day Service (see descriptions below)                                                                                                             | Standard (filing fee \$100)                                                                                                                                                 |      |         |                 |                                                 |
| 1. Limited Liability Company Name                                                                                                                                                        |                                                                                                                                                                             |      |         |                 |                                                 |
| Type of Limited Liability Company                                                                                                                                                        | Limited Liability Company                                                                                                                                                   |      |         |                 |                                                 |
| Entity name                                                                                                                                                                              | E Cameron Holdings LLC                                                                                                                                                      |      |         |                 |                                                 |
| 2. The complete street address of the principal office is:                                                                                                                               |                                                                                                                                                                             |      |         |                 |                                                 |
| Principal Office Address                                                                                                                                                                 | 1785 N FOXGLOVE LANE<br>POST FALLS, ID 83854                                                                                                                                |      |         |                 |                                                 |
| 3. The mailing address of the principal office is:                                                                                                                                       |                                                                                                                                                                             |      |         |                 |                                                 |
| Mailing Address                                                                                                                                                                          | 1785 N FOXGLOVE LN<br>POST FALLS, ID 83854-9295                                                                                                                             |      |         |                 |                                                 |
| 4. Registered Agent Name and Address                                                                                                                                                     |                                                                                                                                                                             |      |         |                 |                                                 |
| Registered Agent                                                                                                                                                                         | Registered Agent<br>L.J. Porter<br>Physical Address:<br>1785 N FOXGLOVE LANE<br>POST FALLS, ID 83854<br>Mailing Address:<br>1785 N FOXGLOVE LN<br>POST FALLS, ID 83854-9295 |      |         |                 |                                                 |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity.                                             |                                                                                                                                                                             |      |         |                 |                                                 |
| 5. Governors                                                                                                                                                                             |                                                                                                                                                                             |      |         |                 |                                                 |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>L.J. Porter Jr.</td><td>1785 N FOXGLOVE LN<br/>POST FALLS, ID 83854-9295</td></tr></tbody></table> |                                                                                                                                                                             | Name | Address | L.J. Porter Jr. | 1785 N FOXGLOVE LN<br>POST FALLS, ID 83854-9295 |
| Name                                                                                                                                                                                     | Address                                                                                                                                                                     |      |         |                 |                                                 |
| L.J. Porter Jr.                                                                                                                                                                          | 1785 N FOXGLOVE LN<br>POST FALLS, ID 83854-9295                                                                                                                             |      |         |                 |                                                 |
| Signature of Organizer:                                                                                                                                                                  |                                                                                                                                                                             |      |         |                 |                                                 |
| <u>Joanthon Frantz</u>                                                                                                                                                                   | <u>05/06/2021</u>                                                                                                                                                           |      |         |                 |                                                 |
| Sign Here                                                                                                                                                                                | Date                                                                                                                                                                        |      |         |                 |                                                 |

B0607-5822 05/06/2021 4:09 PM Received by ID Secretary of State Lawrence Denney