

**FILED EFFECTIVE**

2017 MAR 15 PM 4:02

SECRETARY OF STATE  
STATE OF IDAHO

251



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in **duplicate**.

1. The name of the limited liability company is:  
**TFES 619, LLC**

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

2. The complete street and mailing addresses of the principal office is:  
**580 JENSEN GROVE DR., BLACKFOOT, ID 83221**

(Street Address)

**PO BOX 339, BLACKFOOT, ID 83221**

(Mailing Address, if different)

3. The name of the registered agent and street address of the registered agent:  
**Title Financial Specialty Services, Inc 580 Jensen Grove Dr., Blackfoot, ID 83221**

(Name)

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:  
**Shauna Romrell, President PO Box 339, Blackfoot, ID 83221**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):  
**PO Box 339, Blackfoot, ID 83221**

(Address)

Signature of organizer(s)

Signature:

Printed Name: Shauna Romrell, President

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Rev. 11/2015

Secretary of State use only

IDAHO SECRETARY OF STATE  
**03/15/2017 05:00**

CK:PREPAID CT:127288 BH:1573923  
1@ 100.00 = 100.00 ORGAN LLC #2  
1@ 20.00 = 20.00 EXPEDITE C #3

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