## . 251

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

2816 DEC -2 AM 9: 09

FILED EFFECTIVE

Base Filing fee: \$100.00.

Complete and submit the application in duplicate

Title 30, Chapters 21 and 25, Idaho Code

SECRETARY OF STATE

	Complete and Submit	tne application in <u>duplicate</u> .	STATE OF IDAHO		
1,	The name of the limited liabilit	y company is:			
	Thunder Dr., LLC				
	(Remember to include the words "Limited Liability Company," "Limited Companyj, "or the abbreviations L.L.C., LLC, or LC)				
2.	The complete street and mailing addresses of the principal office is:				
	60 East Simpson Ave.		Jackson	WY 83001	
	(Street Address)		(City)	(State) (Zipcode)	
	60 East Simpson Ave., #2869		Jackson	WY 83001	
	(Mailing Address, if different)		(City)	(State) (2	Zipcode)
3.	The name and complete street address of the registered agent:				
			vd., STE 106A, Coeur d'Alene, ID 83814		
	(Name)	(Address)	(City)	(State)	(Zipcode)
4.	The name and address of at least one governor of the limited liability company:				
	T4 Tiers, LLC	60 East Simpson Ave		on WY	83001
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Name)	(Address)	(City)	(State)	(Zipcode)
	(Mario)	(Address)	(Oity)	(State)	(Zipcode)
5.	Mailing address for future correspondence (annual report notices):				
	60 East Simpson Ave.,	#2869	Jacks <u>on</u>	WY	83001
	(Address)		(City)	(State)	(Zipcode)
Sig	nature of organizer(s).				
• • • • • • • • • • • • • • • • • • • •			Secretary of State use only		
Printed Name: Lisa Shults			IDAHO SECRETARY OF STATE 12/02/2016 05:00		
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Sig	nature: NO 10		10 100.00 = 10		
Prir	nted Name:			-1/1/	
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Rev. 07/2015

Signature:\_\_