





Office of the secretary of state, Phil McGrane CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

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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		The Lofts on Riverview LLC	
2. The complete street address of the princip	oal office is:		
Principal Office Address		18178 WEST RIVERVIEW DRIVE POST FALLS, ID 83854	
3. The mailing address of the principal office	is:		
Mailing Address		18178 W RIVERVIEW DR POST FALLS, ID 83854-6788	
4. Registered Agent Name and Address			
Registered Agent		PAULA SAURETTE	
		Registered Agent	
		Physical Address 18178 WEST RIVERVIEW DR	
		POST FALLS, ID 83854	
		Mailing Address	
I affirm that the registered age 5. Governors	ent appointed has consented	I to serve as registered agent for this er	ntity.
Name		Address	
Paula Saurette		18178 WEST RIVERVIEW DRIVE POST FALLS, ID 83854	
Signature of Organizer:			
Paula Saurette		09/12	7/2024
Sign Here		Date	