



0004463804

**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 #: 0004463804

Date Filed: 10/29/2021 1:19:27 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  | Sawtooth Wave Volleyball Club LLC   |      |         |                 |                                       |
| 2. The complete street address of the principal office is:   |   |      |         |                 |                                       |
| Principal Office Address   | 1416 EVERETT ST<br>CALDWELL, ID 83605   |      |         |                 |                                       |
| 3. The mailing address of the principal office is:   |   |      |         |                 |                                       |
| Mailing Address  | 1416 EVERETT ST<br>CALDWELL, ID 83605-4243  |      |         |                 |                                       |
| 4. Registered Agent Name and Address   |   |      |         |                 |                                       |
| Registered Agent   | Registered Agent<br>Elizabeth Myers<br>Physical Address:<br>1416 EVERETT ST<br>CALDWELL, ID 83605<br>Mailing Address:<br>1416 EVERETT ST<br>CALDWELL, ID 83605-4243 |      |         |                 |                                       |
| <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>Elizabeth Myers</td><td>1416 EVERETT ST<br/>CALDWELL, ID 83605</td></tr></tbody></table> |   | Name | Address | Elizabeth Myers | 1416 EVERETT ST<br>CALDWELL, ID 83605 |
| Name   | Address   |      |         |                 |                                       |
| Elizabeth Myers  | 1416 EVERETT ST<br>CALDWELL, ID 83605   |      |         |                 |                                       |
| Signature of Organizer:  |   |      |         |                 |                                       |
| <i>Elizabeth Myers</i>   | <i>10/29/2021</i>   |      |         |                 |                                       |
| Sign Here  | Date  |      |         |                 |                                       |

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