





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

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-FILED-

File #: 0005414128

Date

Date Filed: 9/29/2023 11:05:56 AM

Entity name Entity name Entity name Endependence Financial Insurance Services LLC The complete street address of the principal office is: Principal Office Address Principal Office Address The mailing address of the principal office is: Mailing Address Registered Agent Name and Address Registered Agent UNITED STATES CORPORATION AGENTS INC Commercial Registered Agent Physical Address 800 W MAIN ST STE 1460 BOISE, ID 83702 Mailing Address 800 W MAIN ST STE 1460 BOISE, ID 83702 Mailing Address 800 W MAIN ST STE 1460 BOISE, ID 83702 Mailing Address 800 W MAIN ST STE 1460 BOISE, ID 83702	descriptions below)	npany · Same Day Service (see	Expedited (+\$40; filing fee \$140)
Entity name Endependence Financial Insurance Services LLC 2. The complete street address of the principal office is: Principal Office Address 3597 E MONARCH SKY LN SUITE F240 MERIDIAN, ID 83646 3. The mailing address of the principal office is: Mailing Address 3597 E MONARCH SKY LN STE F240 MERIDIAN, ID 83646-1053 4. Registered Agent Name and Address Registered Agent UNITED STATES CORPORATION AGENTS INC Commercial Registered Agent Physical Address 800 W MAIN ST STE 1460 BOISE, ID 83702 Mailing Address 800 W MAIN ST STE 1460 BOISE, ID 83702 I affirm that the registered agent appointed has consented to serve as registered agent for this entity. 5. Governors Name Address Tyler Patrick Jones 3597 E MONARCH SKY LN SUITE F240	1. Limited Liability Company Name		
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	Tyler Patrick Jones		
Signature of Organizer:			
	Signature of Organizer:		

Sign Here