

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 11 JAN -4 PH 12: 22

	(Instructions on bac	k of application)
	•	SECRE BY OF STATE
1.	The name of the limited liability co	
	Ra	amakers & Hester, LLC
2.	The complete street and mailing ac	ddresses of the initial designated/principal office:
	1921 E Trail Blazer Dr., Meridian, ID 83646	
	(Street Address) 1921 E Trail Blazer Dr., Meridian, ID 83646	
	(Mailing Address, if different than street address)	
3.	The name and complete street add	dress of the registered agent:
	Ann G. Hester	1921 E Trail Blazer Dr., Meridian, ID 83646
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability	
	company:	Address
	Ann G. Hester	1921 E Trail Blazer Dr., Meridian, ID 83646
		1905 E Trail Blazer Dr., Meridian, ID 83646
	Demetria A. Ramakers	1905 E Trail Blazer Dr., Meridian, ID 65040
5.	Mailing address for future correspondent	ondence (annual report notices):
	1921 E. Trail Blazer Dr., Meridian, ID 8	3646
_		D.
6.	Future effective date of filing (option	onal):
<u>~</u>		ar authorized
_	nature of a manager, member of son.	or authorized
pei		Secretary of State use only
Sig	nature MS Akite	2
Тур	ped Name: Ann G. Hester	
		IDAHO SECRETARY OF STATE
Sig	nature	
Tvr	ped Name:	1 0 100.00 = 100.00 UNGAN LLC #

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