



0004214849

**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 #: 0004214849

Date Filed: 3/20/2021 4:22:58 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                                                                                                                                                                                                                              | 760 Sapphire LLC                                                                                                                                   |      |         |            |                                |              |                                |
| 2. The complete street address of the principal office is:                                                                                                                                                                               |                                                                                                                                                    |      |         |            |                                |              |                                |
| Principal Office Address                                                                                                                                                                                                                 | CINDY AASE<br>367 DOVE LANE<br>SAGLE, ID 83860                                                                                                     |      |         |            |                                |              |                                |
| 3. The mailing address of the principal office is:                                                                                                                                                                                       |                                                                                                                                                    |      |         |            |                                |              |                                |
| Mailing Address                                                                                                                                                                                                                          | PO BOX 1334<br>SAGLE, ID 83860-1334                                                                                                                |      |         |            |                                |              |                                |
| 4. Registered Agent Name and Address                                                                                                                                                                                                     |                                                                                                                                                    |      |         |            |                                |              |                                |
| Registered Agent                                                                                                                                                                                                                         | Registered Agent<br>Cindy Aase<br>Physical Address:<br>367 DOVE LANE<br>SAGLE, ID 83860<br>Mailing Address:<br>PO BOX 1334<br>SAGLE, ID 83860-1334 |      |         |            |                                |              |                                |
| <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>Cindy Aase</td><td>PO BOX 1334<br/>SAGLE, ID 83860</td></tr><tr><td>Eric Ridgway</td><td>PO BOX 1334<br/>SAGLE, ID 83860</td></tr></tbody></table> |                                                                                                                                                    | Name | Address | Cindy Aase | PO BOX 1334<br>SAGLE, ID 83860 | Eric Ridgway | PO BOX 1334<br>SAGLE, ID 83860 |
| Name                                                                                                                                                                                                                                     | Address                                                                                                                                            |      |         |            |                                |              |                                |
| Cindy Aase                                                                                                                                                                                                                               | PO BOX 1334<br>SAGLE, ID 83860                                                                                                                     |      |         |            |                                |              |                                |
| Eric Ridgway                                                                                                                                                                                                                             | PO BOX 1334<br>SAGLE, ID 83860                                                                                                                     |      |         |            |                                |              |                                |
| Signature of Organizer:                                                                                                                                                                                                                  |                                                                                                                                                    |      |         |            |                                |              |                                |
| <u>Cindy Aase</u>                                                                                                                                                                                                                        | <u>03/20/2021</u>                                                                                                                                  |      |         |            |                                |              |                                |
| Sign Here                                                                                                                                                                                                                                | Date                                                                                                                                               |      |         |            |                                |              |                                |

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