





## STATE OF IDAHO

Office of the secretary of state, Lawerence 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 #: 0004697831

04/14/2022

Date

Date Filed: 4/14/2022 12:03:20 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Sedescriptions below)	ervice (see Expedited (+\$40; filing fee \$140)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	1483 Old Spiral Hwy, LLC
2. The complete street address of the principal office is:	
Principal Office Address	504 MAIN STREET SUITE #127 LEWISTON, ID 83501
3. The mailing address of the principal office is:	
Mailing Address	504 MAIN ST STE 127 LEWISTON, ID 83501-1846
4. Registered Agent Name and Address	
Registered Agent	Registered Agent Kelsey Clyde Kunkel Physical Address: 2233 2ND AVE N LEWISTON, ID 83501 Mailing Address: PO BOX 373 LEWISTON, ID 83501-0373
I affirm that the registered agent appointed ha	as consented to serve as registered agent for this entity.
5. Governors	
Name	Address
Vision Quest LLC (Member)	1620 CENTRAL AVE STE #202

CHEYENNE, WV 82001

PO BOX 373 (MAILING) 2233 2ND AVE N (PHYSICAL)

LEWISTON, ID 83501

Kelsey C Kunkel (Manager)

Signature of Organizer:

Sign Here

Kelsey Clyde Kunkel