



0004119598

**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 #: 0004119598

Date Filed: 1/6/2021 8:31:08 AM

| 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                                                                                                                                                                    | Confluence River Services LLC                                                                                                                                      |      |         |                   |                                     |
| 2. The complete street address of the principal office is:                                                                                                                     |                                                                                                                                                                    |      |         |                   |                                     |
| Principal Office Address                                                                                                                                                       | 405 LOMBARD ST<br>SALMON, ID 83467                                                                                                                                 |      |         |                   |                                     |
| 3. The mailing address of the principal office is:                                                                                                                             |                                                                                                                                                                    |      |         |                   |                                     |
| Mailing Address                                                                                                                                                                | 405 LOMBARD ST<br>SALMON, ID 83467-3920                                                                                                                            |      |         |                   |                                     |
| 4. Registered Agent Name and Address                                                                                                                                           |                                                                                                                                                                    |      |         |                   |                                     |
| Registered Agent                                                                                                                                                               | Registered Agent<br>Kristin L Baunsgard<br>Physical Address:<br>405 LOMBARD ST.<br>SALMON, ID 83467<br>Mailing Address:<br>405 LOMBARD ST<br>SALMON, ID 83467-3920 |      |         |                   |                                     |
| <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>Richard A Greiner</td><td>405 LOMBARD ST.<br/>SALMON, ID 83467</td></tr></tbody></table> |                                                                                                                                                                    | Name | Address | Richard A Greiner | 405 LOMBARD ST.<br>SALMON, ID 83467 |
| Name                                                                                                                                                                           | Address                                                                                                                                                            |      |         |                   |                                     |
| Richard A Greiner                                                                                                                                                              | 405 LOMBARD ST.<br>SALMON, ID 83467                                                                                                                                |      |         |                   |                                     |
| Signature of Organizer:                                                                                                                                                        |                                                                                                                                                                    |      |         |                   |                                     |
| <i>R Andrew Greiner</i>                                                                                                                                                        | <i>01/06/2021</i>                                                                                                                                                  |      |         |                   |                                     |
| Sign Here                                                                                                                                                                      | Date                                                                                                                                                               |      |         |                   |                                     |

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