

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 JUL 21 PM 3: 13

| 1. The name of the limited liability comp | any is: SECRETARY OF STATE |
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| Backyard Bakery, 11 | any is: SECRETARY OF STATE STATE OF IDAHO |
| 2. The complete street and mailing addre | esses of the initial designated/principal office: |
| | ID 83706 |
| (Mailing Address, if different than street address) | |
| 3. The name and complete street address | s of the registered agent: |
| Vicki Fick (Name) | 1208 Hale St Boise TD 83706e (Street Address) |
| The name and address of at least one company: | member or manager of the limited liability |
| Name | Address |
| Vicki Fick | 208 Hale St. Boise ID 837010 |
| | |
| 5. Mailing address for future corresponde | nce (annual report notices): |
| 1208 Hale St Boise I | D 837010 |
| 6. Future effective date of filing (optional) | |
| Signature of organizer(s). (An organizer is a meacting in behalf of a member or members). | |
| Signature Ville was | Secretary of State use only |
| Typed Name: Vicki Fisk | Total Tota |
| The state of the s | TRAUD SECONTARY OF STATE |
| Signature | ### IDAHU SECRETARY OF STATE ################################### |
| Typed Name: | 1 9 100.00 = 100.00 ORGAN LLC # |

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