



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

11 JUL 21 AM 9:00

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

OUTERFRINGES LLC

2. The complete street and mailing addresses of the initial designated/principal office:

521 E. NOBLE FIR CT.

(Street Address)

NAMPA, ID 83686

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

PATRICIA VAUGHAN

(Name)

521 E. NOBLE FIR CT., NAMPA, ID 83686

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

PATRICIA VAUGHAN

521 E. NOBLE FIR CT., NAMPA, ID 83686

MARGY BOSTON

191 E. KENTER ST., KUNA, ID 83634

5. Mailing address for future correspondence (annual report notices):

521 E. NOBLE FIR CT., NAMPA, ID 83686

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: PATRICIA VAUGHAN

Signature

Typed Name: MARGY BOSTON

Secretary of State use only

IDAHO SECRETARY OF STATE
07/21/2011 05:00
CK: 1031 CT: 260051 BH: 1203309
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