

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

12 MAR 12 AM 10: 18

STATE OF IDAHO

1. The name of the limited liability company is: STATE OF IDAH		STATE OF IDAHO	
EFFORTLE:	SS BEAUTY PERMANENT CO	DSMETICS LLC	
2. The complete street and mai	ling addresses of the initia	al designated office:	
(Street Address) 19 HARRIS CREEK RD, HORSE (Mailing Address, if different than street a			
3. The name and complete stre	et address of the register	ed agent:	
KARI REAY COOPER (Name)	19 HARRIS CREEK (Street Address)	RD, HORSESHOE BEND, ID 83629	
The name and address of at company:	least one member or mar	nager of the limited liability	
<u>Name</u>		<u>Address</u>	
KARI REAY COOPER	19 HARRIS CREEK	RD, HORSESHOE BEND, ID 83629	
5. Mailing address for future cor	•	ort notices):	
19 HARRIS CREEK RD, HORSE	SHOE BEND, ID 83629		
6. Future effective date of filing	(optional):		
Signature of a manager, mem	ber or authorized		
person.		Secretary of State use only	
Signature			
Typed Name:			
Signature Millow (Dove)		IDAHO SECRETARY OF STATE 93/12/2012 05:00 CK: 1221 CT: 268028 BH: 1314633 1 0 190.00 = 100.00 DRGAN LLC # 2	
Typed Name: KARI REAY COOPER	₹	TE TROUDS - TOOLOG CHAMIL FEG M F	

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