

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2011 IAM 2 AL

	(Instructions on b	ack of application)	2014 JAN -3 AH 8: 48
1.	The name of the limited liability	company is:	SECRETATION
	Smith's Hometown Hardware, LLC		Charles Bally
2.	The complete street and mailing addresses of the initial designated office: 90 E. Idaho Avenue, Glenns Ferry, ID 83623		
	(Street Address) P.O. Box 994, Glenns Ferry, ID 83623		A Parketine and the second and the s
3.	(Mailing Address, if different than street address) The name and complete street address of the registered agent:		
	Lynda Smith 90 E. Idaho Avenue, Glenns Ferry, ID 83623		
	(Name)	(Street Address)	
	company: Name Lynda Smith	Address 90 E. Idaho Avenue, Glenns Ferry, ID 83623	
4.	The name and address of at least one member or manager of the limited liability		
		90 E. Idaho Avenue, Glenns Ferry, ID 83623	
	Scott Smith	90 E. Idaho Avenue, Glenns Ferry, ID 83623	
5.	Mailing address for future corres	•	rt notices):
	P.O. Box 994, Glenns Ferry, ID 83623		
6.	Future effective date of filing (op	tional):	
_	nature of a manager, member	or authorized	
	nature Minda Smith	8	Secretary of State use only
	ed Name: LYNDA SMIT		W132779
Sign	nature		IDAHO SECRETARY OF STATE 01/03/2014 05:00

CK: 19206 CT: 260599 BH: 1404165 1 8 100.88 = 198.80 ORGAN LLC # 2

Typed Name: