



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 MAR -1 AM 11:33

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Bright Lights Little City LLC

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

7169 Main Street, Bonners Ferry, ID 83805

(Street Address)

(Mailing Address, if different than street address)

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

Carolyn L Testa

(Name)

7169 Main Street, Bonners Ferry, ID 83805

(Street Address)

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

Name	Address
Carolyn L Testa	7169 Main Street, Bonners Ferry, ID 83805
_____	_____
_____	_____
_____	_____
_____	_____

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

7169 Main Street, Bonners Ferry, ID 83805

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature *Carolyn L. Testa*
Typed Name: **Carolyn L Testa**

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/01/2011 05:00
CK: 617872 CT: 172099 BH: 1262145
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