



CERTIFICATE OF ORGANIZATION **FILED EFFECTIVE** LIMITED LIABILITY COMPANY

2013 JAN 23 AM 9:00

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Shawn-a-riffic, LLC

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

1213 W Highland Street, Boise, ID 83706-3332

(Street Address)

(Mailing Address, if different than street address)

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

Shawn M McKay

(Name)

1213 W Highland Street, Boise, ID 83706-3332

(Street Address)

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

NameAddress

Shawn M McKay

1213 W Highland Street, Boise, ID 83706-3332

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

1213 W Highland Street, Boise, ID 83706-3332

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

Signature of a manager, member or authorized person.

Signature

Shawn McKay

Typed Name: Shawn M McKay

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/23/2013 05:00
CK: 1197 CT: 270506 RH: 1356869
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