

FILED EFFECTIVE
2010 JUL 08 19

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liability company is: **STATE OF IDAHO**
Sage Cuisine, LLC2. The complete street and mailing addresses of the initial designated/principal office:
11956 Jody Dr. Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Tracie Merrell
(Name)11956 Jody Dr. Boise, ID 83713
(Street Address)

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

<u>Name</u>	<u>Address</u>
Tracie Merrell	11956 Jody Dr. Boise, ID 83713

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

Tracie Merrell 11956 Jody Dr. Boise, ID 83713

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Tracie Merrell
Typed Name: Tracie Merrell

Secretary of State use only

 g:\eplatform\LLC\forms\cont.org_llc.PMD
Revised 07/20/08
Signature _____
Typed Name: _____
 IDAHO SECRETARY OF STATE
 07/02/2010 05:00
 CK: 1045 CT: 237537 BH: 1229216
 1 * 100.00 = 100.00 ORGAN LLC # 1

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