



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 APR 18 AM 8:28

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Blue Sky Salon & Spa LLC

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

1111 Blue Lakes Blvd N Ste E Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Julie Conley

(Name)

2381 Julie Lane Twin Falls, ID 83301

(Street Address)

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

**Name**

**Address**

Julie Conley

2381 Julie Lane Twin Falls, ID 83301

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

2381 Julie Lane Twin Falls, ID 83301

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Julie Conley

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/18/2011 05:00  
CK: 3794 CT: 215018 BH: 1269742  
1 @ 100.00 = 100.00 ORGAN LLC # 2

W102567