



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 SEP 16 AM 8:32
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Details by Marizza, LLC

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

1358 Albion Avenue, Burley, Idaho 83318

(Street Address)

(Mailing Address, if different than street address)

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

Marizza Shoup

(Name)

1358 Albion Avenue, Burley, Idaho 83318

(Street Address)

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

Name

Address

Marizza Shoup

1542 Miller Avenue, Burley, Idaho 83318

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

1358 Albion Avenue, Burley, Idaho 83318

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

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

Signature

Typed Name: Marizza Shoup

Signature

Typed Name:

Secretary of State use only

W77720

IDAHO SECRETARY OF STATE
09/16/2008 05:00
CK: 11456 CT: 15366 BH: 1136888
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