

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY 06 MAY 16 PM 3: 31

	(Instructions on back of a	application)	SECE	0.000
1.	The name of the limited liability compani	y is:	Siz	STATE STATE
	CITY FLORAL, LLC			
2.	The street address of the initial registere		83651	
	and the name of the initial registered age	ent at the above a	ddress is:	
3.	The mailing address for future correspon 1229 N. MIDLAND BLVD., NAM		83651	
4.	Management of the limited liability company will be vested in:			
	Manager(s) or Member(s) (please check the appropriate box)			
5.	If management is to be vested in one or naddress(es) of at least one initial manage	er. If managemer	t is to be vested	in the
	member(s), list the name(s) and address	(es) of at least or	e muai membe	r.
	Mame	(es) of at least or	Address	r.
		(es) or at least or	Address	
	Name		Address	
	Name	1229 N. MII	Address	
	Name	1229 N. MII	Address	
	Name	1229 N. MII	Address	
	Name	1229 N. MII	Address	
6.	Name STEPHANIE KILLEBREW	1229 N. MII NAMPA, IDAH	Address PLAND BLVD. IO 83651	
5	Signature of at least one person responsi	1229 N. MII NAMPA, IDAH	Address DLAND BLVD. IO 83651 e limited liability	company:
5	STEPHANIE KILLEBREW Signature of at least one person responsitions of the state of	1229 N. MII NAMPA, IDAH	Address PLAND BLVD. IO 83651	company:
5	Signature of at least one person responsi	1229 N. MII NAMPA, IDAH	Address DLAND BLVD. IO 83651 e limited liability Secretary of Sta	company:
5 7 0	STEPHANIE KILLEBREW Signature of at least one person responsition of the state of	1229 N. MII NAMPA, IDAH	Address DLAND BLVD. IO 83651 e limited liability Secretary of Sta	company:
S (STEPHANIE KILLEBREW Signature of at least one person responsitions of the state of	Dispute the special control of the special co	Address DLAND BLVD. 10 83651 e limited liability Secretary of Sta	company: