

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

12 FEB 13 AM 9: 19

(Instructions on back of application)

E	(Instructions on I	back of application)	SECRETIEN OF STATE
1.	The name of the limited liability	company is:	SECRETARY OF STATE STATE OF TOTAL
		Prepared Pantry LLC	
2.	The complete street and mailing		esignated office:
	(Street Address)		
	(Mailing Address, if different than street address	ess)	· · · · · · · · · · · · · · · · · · ·
3.	The name and complete street address of the registered agent:		
	Amber Slaughter	1354 S. Willow Wood W	ay, Eagle Idaho 83616
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Amber Slaughter	1354 S. Willow Wood W	ay, Eagle Idaho 83616
			1=
5.	Mailing address for future corre-	spondence (annual report	notices):
٠.	Mailing address for future correspondence (annual report notices): 1354 S. Willow Wood Way, Eagle Idaho 83616		
6.	Future effective date of filing (or		
Sig pers	nature of a manager, membe	r or authorized	
_	nature Muse Auros ed Name: Amera Sepu Sur		Secretary of State use only
ıyρ	ed Hallie. MINNER SPAINT		
Sign	nature		IDAHO SECRETARY OF STATE
	ed Name:		02/14/2012 05:00 CK: 1032 CT: 266977 BH: 1310529

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