

Signature\_ Typed Nam

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

12 JAN 17 PM 2: 30

| 1. The name of the limited liability company is:  | SECRETARY OF STATE  |
|---|---|
| 1. The name of the limited liability company is:  | STATE OF IDAHO  |
| Simple Eats IIC  The complete street and mailing addresses of the initial decignated to | ringinal office:  |
| 2. The complete street and mailing addresses of the initial designated/pi               | i i   |
| 504 Main Street Swite #210 Lewiston, I  | 2 83501   |
| (Mailing Address, if different than street address)                                     |   |
| 3. The name and complete street address of the registered agent.                        | the Difference of the state of |
|   | _   |
| Melony Micknight 1004 29#St. Lew  | iston, ID 8350  |
|   |   |
| 4. The name and address of at least one member or manager of the limit                  | ited liability  |
| company:  Name Address  |   |
|   | ID83501   |
| Melony Mcknight 100429 5t. Lewiston,<br>Magen Goforth 723 14 Ave Clarkston              | MA 991102   |
| Magn BOFOTTH 125 14 AVE CIANSION  | <del>, W/1 (140 )</del>   |
|   |   |
|   |   |
|   |   |
|   |   |
| 5. Mailing address for future correspondence (annual report notices):                   |   |
| 504 Main Street Swite #210 Lewiston, ID 8   | 35d   |
|   |   |
| 6. Future effective date of filing (optional):  |   |
| Signature of a manager, member or authorized  |   |
| person.   |   |
| Secretary of  | State use only  |
| Typed Name: Western Totacth   |   |
| Typed Name: Western Gotorth   |   |

cert\_org\_lic Rev. 07/2010

IDAHO SECRETARY OF STATE

01/18/2012 05:00

CK: 14396534183 CT: 266023 BH: 1306488
1 9 190.00 = 100.00 ORGAN LLC # 2

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