



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2012 FEB 13 PM 3:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Boda's Grill LLC

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

2695 Highway 93 Twin Falls Id 83301
(Street Address)

(Mailing Address, if different than street address)

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

Evalia Boda 2433 Oakley Ave Hollister Id. 83301
Boda's Inc. 2695 Highway 93 Twin Falls Id
(Name) (Street Address) 83301

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

Name	Address
<u>Robert Loughmiller</u>	<u>2505 N 2500 E T.F. Id 83301</u>
<u>Jamie E Hale</u>	<u>2495 E 2500 N T.F. Id 83301</u>
_____	_____
_____	_____
_____	_____

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

2695 Highway 93 Twin Falls Id 83301

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

Signature of a manager, member or authorized person.

Signature Jamie E Hale
Typed Name: Jamie E Hale

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/13/2012 05:00
CK: 755 CT: 266964 BH: 1318475
1 @ 100.00 = 100.00 ORGAN LLC # 2

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