

## ARTICLES OF ORGANIZATIONLED EFFECTIVE LIMITED LIABILITY COMPANY 08 MAY -8 PM 1:56

(Instructions on back of application)

1. The name of	the limited liability co	mpany is:	SECRETARY OF STATE
CC Forte Cu	stom Interiors - Cara's	s Division LLC	STATE OF IDAHO
2. The street add	ress of the initial regi	istered office is:	
	Eagle Dr., Ste. 300, E	and the second s	
•	of the initial registere		
Cara Beers	or the milital registere	u agent at the app	ve address is:
	dan for for		
	dress for future corre		
	Eagle Dr., Ste 300, E		
4. The limited liab	pility company will be:		
Manager-mana	iged 🔲 or Membe	r-managed 🚺	(please check the appropriate box)
5. If manager-may	naged list the name/	e) and add/	
If member-man	aged, list the name(s	s) and address(es) s) and address(es)	of at least one initial manager. of at least one initial member.
	Name		Address
Cara Beers		4250 F I F	
3		1250 E Iron Eagl	e Ur., Ste 300
	A CONTRACTOR OF THE PROPERTY O	Eagle, ID 83616	
6. Signature of at	east one person resp		the limited liability company:
./	east one person resp		the limited liability company:
Signature:	Dra Bers		the limited liability company:  Secretary of State use only
./	Ma Blus ara Beers		Secretary of State use only
Signature:	Ma Blus ara Beers	consible for forming	
Signature:	Ma Blus ara Beers	consible for forming	Secretary of State use only  WY 101  IDAHO SECRETARY OF STATE
Signature:( Typed Name:C Capacity: Manag	Ma Blus ara Beers		Secretary of State use only