



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAR 19 AM 9:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Whiplash Effects LLC

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

2511 W Timberlake Ip.

(Street Address)

Coeur D Alene , Idaho 83815

(Mailing Address, if different than street address)

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

Carissa Meehan-Farriester

(Name)

2511 W Timberlake Ip.

(Street Address)

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

NameAddress

Carissa Meehan-Farriester 2511 W Timberlake Ip. CDA ID 83815

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

2511 W Timberlake Ip. Coeur D. Alene, IDAHO 83815

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

Signature of a manager, member or authorized person.

Signature 

Typed Name: Carissa Meehan-Farriester

Secretary of State use only

Signature _____

Typed Name: _____

W185698

IDaho SECRETARY OF STATE
03/19/2014 05:00
CK: 1002 CT: 290609 BH: 1416017
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