



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 APR 12 PM 1:04

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Tranquil Aromas LLC

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

311 S. Skyline Drive, Idaho Falls, Idaho 83402

(Street Address)

(Mailing Address, if different than street address)

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

Shane Braden Lindstrom

(Name)

311 S. Skyline Drive, Idaho Falls, Idaho 83402

(Street Address)

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

Name

Address

Shane Braden Lindstrom

311 S. Skyline Drive, Idaho Falls, Idaho 83402

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

311 S. Skyline Drive, Idaho Falls, Idaho 83402

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature
Typed Name: Shane Braden Lindstrom

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
04/12/2010 05:00
CK: 16542 CT: 246966 BH: 1217321
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