

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

TO JAN 12 AM 11:08

SECRETARY OF STATE

The name of the limited liability compa	any is: STATE OF IDAHO
	Huau, LLC
The complete street and mailing addre	esses of the initial designated/principal office:
1313 Michiga	nn Ave. Boise, ID. 83706
(Street Address)	
(Mailing Address, if different than street address)	
The name and complete street address	s of the registered agent:
Joel Glaisyer	1313 Michigan Ave. Boise, ID. 83706
(Name)	(Street Address)
company:	Member or manager of the limited liability Address 2424 Andress St. Rains 15, 93702
Rian Livingston	2421 Anderson St. Boise, ID. 83702
Joel Glaisyer	1313 Michigan Ave. Bassa, ID. 83706
Mailing address for future corresponde	ance (annual report notices):
• • • • • • • • • • • • • • • • • • • •	•
·	ence (annual report notices): 21 Anderson St. Boise, ID. 83702
Rian Livingston 242	21 Anderson St. Boise, ID. 83702
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Rian Livingston 242 Future effective date of filling (optional) gnature of organizer(s). (An organizer is a meing in behalf of a member or members).	ember, or is Secretary of State use only