



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 OCT 21 AM 9:42

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Smokin' Gun Spa and Salon LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

444 Main Ave South Twin Falls, Idaho 83301

(Street Address)

300 Morrison Street Condo #625 Twin Falls, Idaho 83301

(Mailing Address, if different)

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

Mallory McLimans

300 Morrison Street Condo #625 Twin Falls, Idaho 83301

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

Mallory McLimans

300 Morrison St #625 Twin Falls ID 83301

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

300 Morrison Street Condo #625 Twin Falls, Idaho 83301

(Address)

Signature of organizer(s).

Signature:

Printed Name:

Signature:

Printed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

10/21/2016 05:00

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