



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE  
2013 JUL -1 AM 10:04  
SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Catering by Galea LLC

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

27018 S Cedar Grove Hamson ID 83833  
(Street Address)

PO Box 197 Hamson ID 83833  
(Mailing Address, if different than street address)

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

Paul Galea  
(Name)

27018 S Cedar Grove Rd Hamson  
(Street Address) ID 83833

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

Name	Address
<u>Paul Galea II</u>	<u>27018 S Cedar Grove Hamson ID 83833</u>
<u>Megan Galea</u>	<u>27018 S Cedar Grove Hamson ID 83833</u>

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

PO Box 197 Hamson ID 83833

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Paul E. Galea II  
Typed Name: Paul Galea II

Signature Megan Galea  
Typed Name: Megan Galea

Secretary of State use only

IDAHO SECRETARY OF STATE  
07/01/2013 05:00  
CK: 1406 CT: 284890 BH: 1380414  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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