



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 FEB 23 AM 9:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Innovative Layouts LLC

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

5986 N. La Rochelle Dr. Coeur d Alene, ID. 83815

(Street Address)

(Mailing Address, if different than street address)

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

David Weeks

(Name)

5986 N. La Rochelle Dr. Coeur d Alene, ID. 83815

(Street Address)

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

Name

Address

David Weeks

5986 N. La Rochelle Dr. Coeur d Alene, ID. 83815

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

5986 N. La Rochelle Dr. Coeur d Alene ID. 83815

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

Signature of a manager, member or authorized person.

Signature

Typed Name: David Weeks

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/23/2015 05:00

CK:1008 CT:306767 BH:1463005

1@ 100.00 = 100.00 ORGAN LLC #2

W148194