

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 JAN 26 AM 9: 30

SECRETARY OF STATE STATE OF IDAHO

F 6	(Instructions on back	of application)		STATE OF I	DAHO
1. T	he name of the limited liability con	npany is:			
	Legacy Home Furnishings, LLC				_
2. T	The complete street and mailing addresses of the initial designated office:				
	300 Shoup St.				
	(Street Address) Salmon, Idaho 83467				
	(Mailing Address, if different than street address)				
3. T	The name and complete street address of the registered agent:				
	Lestie Alten Baxter	300 Shoup St., S	almon, ID 83467		_
	(Name)	(Street Address)			
	The name and address of at least ocompany: Name Leavin Alter Server		Address Salmon, ID 83467		
	Leslie Allen Baxter				-
	Laura Kathleen Baxter 300 Shoup St., Salmon, ID 83467			_	
5, 1	Mailing address for future correspo		report notices):		
	2635 Channing Way, Idaho Fails, Idaho	83404) SECRETARY OF 26/2015 O:	15
6.	Future effective date of filing (optio	nai):	CK:57446	CT:121759 E	H:145
Siar	nature of a manager, member o	r a ythe rized			
pers	son.	Jh)	Secretary	of State use only	iŧ
Sign	ed Name: Leslie Allen Baxter				
	nature 4BNAN-	Laurak	athleen	Barto	\
•	ed Name: Laura Kathleen Baxter	<u> </u>			•
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