

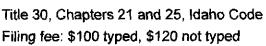
Printed Name:

Signature: ____

Rev. 08/2015

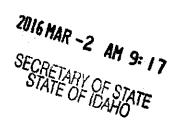
CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE



Complete and submit the application in duplicate.

dilidali batimil adt b



	e words "Limited Liability Company." "Limited Company." or t	
•	mailing addresses of the principal office i	is:
8518 W Utahna St, Boise	e, ID 83714	
Street Address)		
Mailing Address, if different)		
The name and complete s	street address of the registered agent:	
Lauren Tyler	8518 W Utahna St, Boise, I	D 83714
(Narne)	(Address)	
The name and address of	f at least one governor of the limited liabi	ility company:
Lauren Tyler	8518 W Utahna St, Boise, ID 83714	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
_	correspondence (annual report notices)):
8518 W Utahna St, Boise	e, ID 83714	
(∆ddress)		
store of organizario)		
ature of organizer(s).		Secretary of State use only
ed Name: Lauren Tyler		IDAHO SECRETARY OF STATE
- Iliah	11/1 L	03/02/2016 05:00

CK:1849 CT:321118 BH:1516320 10 100.00 = 100.00 ORGAN LLC #2

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