



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 APR 30 AM 10:26

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Sue Bassiri, LLC

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

11327 Cartridge St., Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Sue Bassiri

11327 Cartridge St., Boise, ID 83713

(Name)

(Street Address)

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

Name

Address

Sue Bassiri

11327 Cartridge St., Boise, ID 83713

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

11327 Cartridge St., Boise, ID 83713

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Sue Bassiri

Signature

Typed Name:

Secretary of State use only

g:\corpforms\LLC forms\cert_org_llc.PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
04/30/2010 05:00
CK: 999991 CT: 247560 BH: 1228245
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