



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2014 AUG 15 AM 9:07

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Homestead Embroidery LLC

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

28071 Matthews Rd. Parma, ID 83660

(Street Address)

(Mailing Address, if different than street address)

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

Kathleen Wagstaff 28071 Matthews Rd.

(Name)

(Street Address)

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

Name	Address
<u>Kathleen Wagstaff</u>	<u>28071 Matthews Rd.</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

28071 Matthews Rd. Parma, ID 83660

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

Signature of a manager, member or authorized person.

Signature

Typed Name:

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

08/15/2014 05:00

CK: CASH CT: 300104 BH: 1437415  
1@ 100.00 = 100.00 ORGAN LLC #2

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