



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Click here to clear form.

(Instructions on back of application)

2014 MAY -5 AM 9:44

 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

AshlinStudio LLC

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

7398 W. Garden Glen Dr.

(Street Address)

Boise, ID 83714

(Mailing Address, if different than street address)

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

Rebecca T. Ashlin

(Name)

7398 W. Garden Glen Dr.

(Street Address)

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

Name

Address

Rebecca T. Ashlin
7398 W. Garden Glen Dr.
Boise, ID 83714

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

same as above

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

Signature of a manager, member or authorized person.

Signature

Rebecca T. Ashlin

 Typed Name: Rebecca T. Ashlin

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/05/2014 05:00

CK:1223 CT:296432 BH:1423169

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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