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FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2008 JUL 25 PM 12: 36

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

The Flower Shoppe Etc LLC

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

93 E Bridge St, Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

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

Mary Nemkerakyan

(Name)

93 E Bridge St, Blackfoot, ID 83221

(Street Address)

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

**Name**

Mary Nemkerakyan

**Address**

93 E Bridge St, Blackfoot, ID 83221

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

93 E Bridge St, Blackfoot, ID 83221

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: Mary Nemkerakyan

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

Organized in accordance with Idaho Code

IDAHO SECRETARY OF STATE  
07/25/2008 05:00  
CK: 135982 CT: 172099 BH: 1128000  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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