



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 JUL 15 AM 9:09

1. The name of the limited liability company is:

COLLIGNON ENTERPRISE LLC

SECRETARY OF STATE
STATE OF IDAHO

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

12 MARY ANN LN, BURNSVILLE MN 55337

(Street Address)

(Mailing Address, if different than street address)

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

CHRIS COLLIGNON
(Name)

611 18TH AVE N. NAMPA, ID 83687
(Street Address)

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

Name

Address

LINDSEY COLLIGNON

12 MARY ANN LN, BURNSVILLE, MN 55337

SHAUN COLLIGNON

12 MARY ANN LN, BURNSVILLE, MN 55337

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

12 MARY ANN LN, BURNSVILLE, MN 55337

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

Signature of a manager, member or authorized person.

Signature

Typed Name:

Lindsey E. Collignon

Signature

Typed Name:

SHAUN COLLIGNON

Secretary of State use only

IDAHO SECRETARY OF STATE
07/15/2013 05:00
CK: 965501182 CT: 285316 BM: 1382069
1 @ 100.00 = 100.00 ORGAN LLC # 2

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