



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 AUG 16 AM 11:07

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Phreskin LLC

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

1524 W. Hays Ste. 205

(Street Address)

(Mailing Address, if different than street address)

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

Carly Letson

(Name)

1524 W. Hays Ste. 205

(Street Address)

Boise, ID 83702

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

Carly Letson

Name

1524 W. Hays Ste. 205

Address

Boise, ID 83702

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

122 W. Village Ln. Boise, ID 83702

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
08/16/2011 05:00
CK: 2165 CT: 261611 BH: 1286753
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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