

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2016 NOV 17 AM

建	(Instructions on	back of application) 2014 NO \$ 1 / AM 9: 41
1. The name of the limited liabilit		ty company is:	SECRETARY OF STATE STATE OF IDAHO
Waffle Po	p LLC		OWIT OF IDAHO
_	olete street and maili	-	initial designated office:
(Street Addr			
(Mailing Add	tress, if different than street ad	dress)	
3. The name	e and complete stree	t address of the reg	istered agent:
Bryan H (Promar Promar	2421 W. Los F	Flores Dr. Meridian, ID 83646
(Name)		(Street Address)	
4. The name company:		east one member o	manager of the limited liability
	<u>Name</u>		Address
Bryan H C	Sromar	2421 W. Los F	Flores Dr. Meridian, ID 83646
 			
6 Mailing a	ddaaa far fritring gam	······································	ol compart motions).
•	ddress for future corr Los Flores Dr. Meridian,	•	ai report notices):
6. Future eff	fective date of filing (optional):	
	3 (,	
Signature of person.	a manager, memb	er or authorized	
	hall-		Secretary of State use only IDAHO SECRETARY OF STA
Signature	Page H Cromer		11/17/2014 05:0
Typed Name:	Bryan H Cromar		CK:2072 CT:186475 BH:14
Signature_			16 20.00 = 20.00 EXPEDI
Typed Name:			

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