



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE
2018 SEP -7 AM 8:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Mauis Munchkins LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

419 Tyra Drive, Idaho Falls, Idaho, 83401

(Street Address)

(Mailing Address, if different)

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

Scott M Lewis

419 Tyra Drive, Idaho Falls, Idaho. 83401

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Scott M Lewis

419 Tyra Drive, Idaho Falls, Idaho. 83401

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

419 Tyra Drive, Idaho Falls, Idaho. 83401

(Address)

Signature of organizer(s).

Printed Name: **Scott M Lewis**

Signature: 

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

09/07/2018 05:00

CK:2679 CT:275573 BH:1662838

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