



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 MAY 14 AM 8: 26

12 +	(Instructions on back	of application)	SECRETATION OF STATE
1.	The name of the limited liability company is:		STATE OF TOAHO
	F & Q FRAMING LLC		
2.	The complete street and mailing add	dresses of the initial de	esignated office:
	(Street Address)		
	NAMPA ID 83651 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	JACOB LOPEZ RAMIREZ	1320 W FLAMINGO AV	E TRLR 55 NAMPA ID 83651
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>	Address	
	JACOB LOPEZ RAMIREZ	1320 W FLAMINGO AV	E TRLR 55 NAMPA ID 83651
5.	Mailing address for future correspor	ndence (annual report	notices):
6.	Future effective date of filing (option	nal):	
_	nature of a manager, member or	authorized	
•	son.		Secretary of State use only
Sic	nature Local Zolezk	2	
Ту	nature <u>Local Zdezk</u> o ped Name: <u>JACOB LOPEZ RAMIREZ</u>		
Sig	nature		IDAHO SECRETARY OF STATE
	oed Name:		CK: 59879957827 CT: 283157 BH:

W125290