



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAY 15 PM 12: 24

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

startlivingslim llc

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

1504 S Herron Dr Nampa Id 83686

(Street Address)

(Mailing Address, if different than street address)

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

Natalie Jones

(Name)

1504 S Herron DR Nampa Id 83686

(Street Address)

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

Name

Address

Natalie Jones

1504 S herron Dr Nampa Id 83686

Levi Jones

1504 S Herron Dr Nampa Id 83686

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

1504 S herron Dr Nampa Id 83686

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Natalie Jones

Typed Name: Natalie Jones

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
05/15/2013 05:00  
CK: CASH CT: 283187 BH: 1373974  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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