



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2015 MAR 11 PM 3:57

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Luska LLC

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

2940 N. Milwaukee St. Boise, ID 83704  
(Street Address)

(Mailing Address, if different than street address)

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

Arielle Kolb  
(Name)

2940 N. Milwaukee St. Boise, ID 83704  
(Street Address)

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

**Name**

**Address**

Arielle Kolb 2940 N. Milwaukee St. Boise, ID 83704

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

2940 N. Milwaukee St. Boise, ID 83704

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

Signature of a manager, member or authorized person.

Signature Arielle Kolb

Typed Name: Arielle Kolb

Signature \_\_\_\_\_

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

Secretary of State use only

IDAHO SECRETARY OF STATE

03/11/2015 05:00

CK:2653758 CT:172099 BH:1465623

1@ 100.00 = 100.00 ORGAN LLC #2

W148982