

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2010 OCT 28 PM 4: 35

SEURE IARY DE STATE

(111000000110 0111	STATE OF TOAHO
1. The name of the limited liability	company is:
	Luciano West LLC
2. The complete street and mailing 2600A E. Seltice Way #170 Post Fal	g addresses of the initial designated/principal office:
(Street Address)	
(Mailing Address, if different than street address	ess)
3. The name and complete street	address of the registered agent:
Anthony Lewis	2600A E. Seltice Way #170 Post Fall Idaho 83854
(Name)	(Street Address)
 The name and address of at lea company: 	ast one member or manager of the limited liability
<u>Name</u>	Address
Anthony Lewis	2600A E. Seltice Way #170 Post Fall Idaho 83854
Joshua Andrews	2600A E. Seltice Way #170 Post Fall Idaho 83854
· ·	
. Mailing address for future corre	spondence (annual report notices):
2600A E. Seltice Way #170 Post Fal	II Idaho 83854
i. Future effective date of filing (o	ptional):
ignature of a manager, membe	r or authorized
erson.	Secretary of State use only
ignature	
yped Name: Tony Lews (Arthoria
ignature <u>Amar</u>	IDAHO SECRETARY OF STATE
yped Name: Joshua ande	eUS 10/29/2010 05:00

cert_org_lic Rev. 07/2010

10/29/2010 05:00 CK: 538560 CT: 172099 BH: 1245055 1 0 100.00 = 100.00 ORGAN LLC # 2 1 0 20.00 = 20.00 EXPEDITE C # 3

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