

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application) HAR 16 AM 8: 22

<ol> <li>The name of the limited liability com</li> </ol>	pany is: Office of or ore
Urban Restaurant Conc	
2. The complete street and mailing add	resses of the initial designated/principal office:
<u>4786 S. Bonnell S</u>	Rd.
(Street Address)  Coeur D'Alene ID	
(Mailing Address, if different than street address)	83814
3. The name and complete street addre	ess of the registered agent:
Doug Johnson (Name)	4786 S. Bonnell Rd., Cocurd'Alene JO 8381 (Street Address)
The name and address of at least on company:	e member or manager of the limited liability
<u>Name</u>	Address
Doug Johnson	4786 S. Bonnell Rd., Coeurd'Alene JD 83814
Yaul Cartee	715 N. MADSON CT., LIBERTY LAKE, WA 1909
5. Mailing address for future correspond	
4786 S. Bonnell Rd., Coeur d'A	Hene ID 83814
6. Future effective date of filing (optional	):
Signature of a manager, member or a person.	uthorized
porson:	Secretary of State use only
Signature member	and Magr
Typed Name: Doug JOHNSON	
DO-8	IDAHO SECRETARY OF STATE 03/16/2011 05:00
Signature	CK: 2875 CT: 256587 BH: 1264510 1 0 108.00 = 109.00 ORGAN LLC N 2
Typed Name: Yaul Cartee	1 8 20.90 = 20.00 EXPEDITE C # 3

cert\_org\_lic Rev. 07/2010